

CANDIDATE COMMITTEE COVER PAGE

FILED 25 OCT 2025 AM 10:21

KENT COUNTY CLERK GRAND RAPIDS, MICHIGAN

FOR OFFICIAL USE ONLY

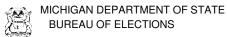
Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate. 3. This Statement covers From: to 07/20/2025 12/30/2024 1. Committee I.D. Number 4. Candidate Last Name M.I. MONICA SPARKS J 2024200 4a. Office Sought Including District # or Community Served (If applicable) 2. Committee Name MAYOR, KENTWOOD CITIZENS TO ELECT MONICA SPARKS 4b. County of Residence KENT COUNTY 5. Committee's Mailing Address 6. Treasurer's Name & Residential Address 4768 SUMMER CREEK LANE SE GRAYCE HOOGERYDE GRAND RAPIDS, MI 49508 9726 SHAW CREEK CT NE ROCKFORD, MI 49341 Area Code and Phone (616) 813-9394
If the address in this box is different from the committee mailing address on the Statement of Organization, mail may Area Code & Phone (616) 706-0989 be sent to this address by the filing official. 7. Treasurer's Business Address 8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper) 9726 SHAW CREEK CT NE ROCKFORD, MI 49341 Area Code and Phone (616) 706-0989Area Code and Phone 9e. Dissolution of Candidate Committee 9. TYPE OF STATEMENT Required ONLY if candidate 9a. X Pre-Election OR 9b. Post-Election By checking this item I/We certify any outstanding debt is not on the ballot for the current year: by the committee to the candidate or his or her spouse is here Pre-Election or Post-Election Statement relates to: by discharged and forgiven, and no longer collectible from July Quarterly the committee. The committee has no oustanding assets, Primary owes no lates fees or has any oustanding debt. October Quarterly X General Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver. Convention Special Annual Statement (Effective date of dissolution Coverage Year School 9d. Amendment to Campaign Statement (Complete Item 9a, 9b , 9c or 9e to Caucus Note: The disposition of residual funds must be reported on indicate which Statement is being Schedule 1B and the Summary Page. amended.) Date of Election, Convention or Caucus 11/04/2025 10. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my\our knowledge and belief the contents are true, accurate and complete. Submitted electronically. Current Treasurer or signature on file 10/25/2025 Designated Record keeper Date Type or Print Name Signature Submitted electronically, 10/25/2025 signature on file Candidate Date Signature Type or Print Name

1. Committee I.D. Number 2024200

SUMMARY PAGE CANDIDATE COMMITTEE

2. Committee Name CITIZENS TO ELECT MONICA SPARKS

CANDIDATE COMMITTEE		
RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions	00.045.00	,
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 30,015.00	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$ 30,015.00	(18.) \$ 30,015.00
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ _0.00	(19.) \$ 0.00
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ 30,015.00	(20.) \$ 30,015.00
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ 33,332.07	(21.) \$ 33,332.07
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ 0.00	(22.) \$ 0.00
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ 18,570.14	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ 0.00	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ 0.00	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ 18,570.14	(23.) \$ 18,570.14
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$ 0.00	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ 0.00	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS	(10b.) \$	
(Add Line 10a + Line 10b)	(11.) \$ 0.00	(24.) \$ 0.00
DEBTS AND OBLIGATIONS 12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ 0.00	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ 0.00	
	BALANCE STATEMENT	
13. Ending Balance of last report filed	(13.) \$ 0.00	
(Enter zero if no previous reports have been filed.) 14. Amount received during reporting period	(14.) + \$ 30,015.00	
(Line 5, Total Contributions & Other Receipts) 15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>30,015.00</u>	
16. Amount expended during reporting period	(16.) - \$ 18,570.14	
(Add lines 9 and 11) 17. ENDING BALANCE		
(Subtract line 16 from line 15)	(17.) \$ 11,444.86	



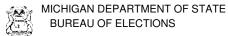
CANDIDATE COMMITTEE

1. Committee I.D. Number 2024200

2. Committee Name

CITIZENS TO ELECT MONICA SPARKS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 11/19/2024 Name & Address: FRANTHEA PRICE 695 BRITTANY CT SE GRAND RAPIDS, MI 49548 5. If over \$100.00 cumulative, please provide:	_{\$} 500.00	_{\$} 500.00
Occupation NOT EMPLOYED Employer		
Business Address		
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 01/06/2025 Name & Address MONICA SPARKS 4768 SUMMER CREEK LN SE	_{\$} 20.00	_s 20.00
KENTWOOD, MI 49508	\$ <u></u>	<u>\$ 20.00</u>
5. If over \$100.00 cumulative, please provide:		
Occupation COUNTY COMMISSIONER Employer KENT COUNTY		
Business Address 300 MONROE AVE NW, GRAND RAPIDS, MI 49503		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 03/07/2025 Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508	_{\$} 20.00	_{\$} 2,540.00
5. If over \$100.00 cumulative, please provide:		
Occupation COUNTY COMMISSIONER Employer KENT COUNTY		
Business Address 300 MONROE AVE NW, GRAND RAPIDS, MI 49503		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/20/2025 Name & Address MICAH PERKINS 2133 RICHMOND ST NE GRAND RAPIDS, MI 49504	_{\$} 250.00	_{\$} _250.00
5. If over \$100.00 cumulative, please provide:		
Occupation TRUSTEE Employer GRAND RAPIDS COMMUNITY COLLEGE		
Business Address 143 BOSTWICK AVE NE, GRAND RAPIDS, MI 49503		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	790.00	
Grand Total of All Schedules 1A		-
(Complete on last page of Schedule) Page	Enter this total on line 3a of Summary Page.	ı



1. Committee I.D. Number

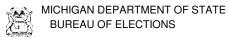
2024200

CANDIDATE COMMITTEE

2. Committee Name CITIZENS TO ELECT MONICA SPARKS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 03/20/2025 Name & Address: ISAAC NORRIS 3942 CHAMBERLAIN AVE SE GRAND RAPIDS, MI 49508	_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide: Occupation ARCHITECT Employer IVNS		
Business Address 1209 KALAMAZOO AVE SE, GRAND RAPIDS, MI 49507		
Type of Contribution:		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/21/2025		
Name & Address MICHAEL OZIER		
8985 REECK RD	_{\$} 100.00	_{\$} 100.00
ALLEN PARK, MI 48101	\$ 100100	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 03/21/2025		
Name & Address: KATE KEMPERMAN 2439 OKEMOS DR SE GRAND RAPIDS, MI 49506	\$ 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/21/2025 Name & Address BRENDA MATHEWS 2088 EASTCASTLE DR SE		
APT AA-9	_{\$} 100.00	_s 100.00
GRAND RAPIDS, MI 49508 5. If over \$100.00 cumulative, please provide:		,
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser	1	1
Page Subtotal	400.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		
2 20	Enter this total on line 3a of Summary	

Page 2 of 39



ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

1. Committee I.D. Number 2024200

Committee I.D. Number _____

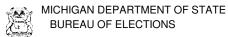
2. Committee Name

CITIZENS TO ELECT MONICA SPARKS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 03/21/2025 Name & Address: ADATUNJI OJO 625 OLDFIELD DR SE BYRON CENTER, MI 49315	_{\$} 200.00	_{\$} 200.00
5. If over \$100.00 cumulative, please provide: Occupation BEHAVIORAL UNIT MANAGER Employer COREWELL HEALTH Business Address 1234 NAPIER AVE, ST JOSEPH, MI 49085 Type of Contribution: Direct Loan from a person Fund Raiser	<u>\$ 200.00</u>	<u>\$</u>
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/21/2025 Name & Address ZORAIDA SANCHEZ 3322 TOWN CROSSING DR. SW GRANDVILLE, MI 49418	_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide: Occupation BUSINESS OWNER Employer SANCHEZ INCOME TAX Business Address 843 CESAR E. CHAVEZ AVE SW, GRAND RAPIDS, MI 49503 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 03/21/2025 Name & Address: OLATUNJI OLAPADE 5801 BIRDSONG CT SE KENTWOOD, MI 49508	_{\$} 200.00	<u>\$ 200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation MANAGING PARTNER Employer NET-CUBE TECHNICAL LIMITED Business Address 139 HAL OLD AIRPORT RD, UNIT 208, BENGALURU, KA 560008 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/21/2025 Name & Address MELISSA LAGRAND 255 COLLEGE AVE SE GRAND RAPIDS, MI 49503	_{\$} 100.00	_{\$_} 100.00
5. If over \$100.00 cumulative, please provide: Occupation COUNTY COMMISSIONER Employer KENT COUNTY Business Address 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	600.00	_

Page 3 of 39

Enter this total on line 3a of Summary Page.



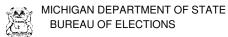
ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

1. Committee I.D. Number 2024200

2. Committee Name

CITIZENS TO ELECT MONICA SPARKS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 03/21/2025 Name & Address: PAM MOSS 2119 41ST ST SE GRAND RAPIDS, MI 49508 5. If over \$100.00 cumulative, please provide: Occupation Employer	_{\$} 10.00	_{\$} 10.00
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/21/2025 Name & Address ROBERT WOMACK 909 HANCOCK ST SE GRAND RAPIDS, MI 49507 5. If over \$100.00 cumulative, please provide:	_{\$} 100.00	_{\$} 100.00
Occupation CITY COMMISSIONER Employer KENT COUNTY		
Business Address 300 MONROE AVE NW, GRAND RAPIDS, MI 49503		
Type of Contribution: Loan from a person Fund Raiser 3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 03/22/2025		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 03/22/2025 Name & Address: GABRIELA DE LA VEGA 4017 KLAVER CT SW WYOMING, MI 49519	<u>\$ 100.00</u>	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation HEALTHCARE INTERPRETER Employer TRINITY HEALTH		
Business Address 20555 VICTOR PKWY, LIVONIA, MI 48152 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/25/2025		
Name & Address PATRICK COLEMAN 3643 PORTMAN LN SE GRAND RAPIDS, MI 49508	_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation SELF-EMPLOYED Employer 7 SOLUTIONS T&D		
Business Address 3643 PORTMAN LN SE, GRAND RAPIDS, MI 49508 Type of Contribution: Loan from a person Fund Raiser		
Page Subtotal	310.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 4 of 39	Enter this total on line 3a of Summary Page.	



1. Committee I.D. Number

2024200

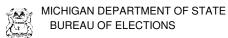
CANDIDATE COMMITTEE

2. Committee Name

CITIZENS TO ELECT MONICA SPARKS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 03/26/2025 Name & Address: KEITH WILLIAMS 19172 HARTWELL ST DETROIT, MI 48235 5. If over \$100.00 cumulative, please provide: Occupation NOT EMPLOYED Employer	_{\$} 250.00	_{\$} 250.00
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 04/18/2025 Name & Address CAROL HENNESSY 1510 KENAN AVE NW GRAND RAPIDS, MI 49504	_{\$} 200.00	_{\$} 200.00
5. If over \$100.00 cumulative, please provide: Occupation COUNTY COMMISSIONER Employer KENT COUNTY Business Address 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Type of Contribution: Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 04/29/2025 Name & Address: KENTWOOD PROFESSIONAL FIREFIGHTERS UNION 4775 WALMA AVE SE KENTWOOD, MI 49512	_{\$} 1,225.00	_{\$} 1,225.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 05/08/2025 Name & Address JEREMIAH WHITE 8000 EAST PARIS AVE SE CALEDONIA, MI 49316	_{\$} 100.00	_{\$} _100.00
5. If over \$100.00 cumulative, please provide:		
Occupation STYLIST Employer REFLECTIONS 5001,LLC		
Business Address 2650 E BELTLINE AVE SE, GRAND RAPIDS, MI 49546		
Type of Contribution: Direct Loan from a person Fund Raiser		T
Page Subtotal	1,775.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on line 3a of Summary	

Page **3** of **39**



1. Committee I.D. Number

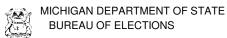
2024200

CANDIDATE COMMITTEE

2. Committee Name CITIZENS TO ELECT MONICA SPARKS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 05/21/2025 Name & Address: BRANDON DILLON 201 NORWOOD AVE SE GRAND RAPIDS, MI 49506	_{\$} 250.00	_{\$} 250.00
5. If over \$100.00 cumulative, please provide: Occupation MANAGING PARTNER Employer THE WINMATT GROUP Business Address 101 N WASHINGTON SQUARE, #1400, LANSING, MI 48933		
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 05/29/2025 Name & Address ANTHONY KING 2024 ONTONAGON AVE SE GRAND RAPIDS, MI 49506	_{\$} 250.00	_{\$} 250.00
5. If over \$100.00 cumulative, please provide: Occupation CEO AND EXECUTIVE DIRECTOR Employer THE WELLNESS PLAN Business Address 7700 2ND AVE, DETROIT, MI 48202 Type of Contribution: Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 06/05/2025 Name & Address: TEAMSTERS 406 POLITICAL ACTION COMMITTEE 2741 TRUMBULL AVENUE DETROIT, MI 48216	_{\$} 2,500.00	_{\$} 2,500.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 06/11/2025 Name & Address KENT COUNTY DEMOCRATIC PARTY 301 FULLER AVE NE GRAND RAPIDS, MI 49503	_{\$} 1,500.00	_{\$} 1,500.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	4,500.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on line 3a of Summary	

Page 6 of 39



SCHEDULE 1A

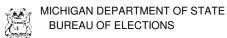
CANDIDATE COMMITTEE

1. Committee I.D. Number 2024200

2. Committee Name

CITIZENS TO ELECT MONICA SPARKS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 06/18/2025 Name & Address: ERIKA PLUNKETT 4333 ASTORIA AVE SE KENTWOOD, MI 49512 5. If over \$100.00 cumulative, please provide: Occupation INDEPENDENT CONSULTANT Employer SELF-EMPLOYED	_{\$} 500.00	_{\$} 500.00
Business Address 4333 ASTORIA AVE SE, KENTWOOD, MI 49512 Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/25/2025 Name & Address KIM GATES 7135 MCCORDS AVE SE ALTO, MI 49302	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide: Occupation RETIRED Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 06/29/2025 Name & Address: ASHLEY BURGIN 1292 SHADOW HILLS DR SW BYRON CENTER, MI 49315	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer Business Address Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 06/30/2025 Name & Address DAWN BAKER 2012 SOUTH TERRACE LANE NE GRAND RAPIDS, MI 49505	_{\$} 250.00	_{\$} 250.00
5. If over \$100.00 cumulative, please provide: Occupation SHOW MANAGER Employer SHOWSPAN		
Business Address 2121 CELEBRATION DR NE, GRAND RAPIDS, MI 49525 Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on line 3a of Summary Page.	-



CANDIDATE COMMITTEE

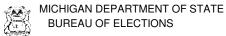
2024200 1. Committee I.D. Number

2. Committee Name

CITIZENS TO ELECT MONICA SPARKS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 06/30/2025 Name & Address: HERBERT SEAMONS 139 LANGDON AVE NE GRAND RAPIDS, MI 49503 5. If over \$100.00 cumulative, please provide: Occupation FIELD REPRESENTATIVE Employer US DEPT OF COMMERCE/ CENSUS BUREAU	_{\$} 100.00	_{\$} 100.00
Business Address 608 W ALLEGAN ST, LANSING, MI 48933		
Type of Contribution: Direct Loan from a person Fund Raiser	-	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 07/16/2025 Name & Address FRANTHEA PRICE 695 BRITTANY CT SE GRAND RAPIDS, MI 49548	_{\$} 500.00	_{\$} 500.00
5. If over \$100.00 cumulative, please provide: Occupation NOT EMPLOYED Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 07/16/2025 Name & Address: DTE ENERGY POLITICAL ACTION COMMITTEE ONE ENERGY PLAZA DETROIT, MI 48226	_{\$} 250.00	_{\$} 250.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 07/19/2025 Name & Address BARB KARENKO 1637 PONTIAC RD SE GRAND RAPIDS, MI 49506	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide:		
Occupation Interventional cardiologist Employer UNIVERSITY OF MICHIGAN HEALTH-WEST		
Business Address 2122 HEALTH DR SW, WYOMING, MI 49519		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	875.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on	
8 39	line 3a of Summary	

Page O of 39



2024200 1. Committee I.D. Number

CANDIDATE COMMITTEE

2. Committee Name

CITIZENS TO ELECT MONICA SPARKS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 07/19/2025 Name & Address: GARY STARK		
2637 HAMPSHIRE BLVD SE	FO 00	200 00
GRAND RAPIDS, MI 49506	_{\$} 50.00	_{\$} 300.00
5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 07/19/2025		
Name & Address KENT COUNTY DEMOCRATIC PARTY		
301 FULLER AVE NE	_s 100.00	_{\$} 1,600.00
GRAND RAPIDS, MI 49503	\$ <u>100.00</u>	\$ 1,000.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 12/17/2024 Name & Address: THOMAS APPEL 1055 FOREST HILL AVE APT 269 GRAND RAPIDS, MI 49546 5. If over \$100.00 cumulative, please provide:	_{\$} 50.00	_{\$} 50.00
Occupation NOT EMPLOYED Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 02/10/2025 Name & Address SKOT WELCH 3754 BLAZING STAR ST SE KENTWOOD, MI 49512	_{\$} 100.00	_{\$_} 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	300.00	
Grand Total of All Schedules 1A		-
(Complete on last page of Schedule)	Enter this total on	_l
Page 9 of 39	line 3a of Summary Page.	

Page of O



1. Committee I.D. Number

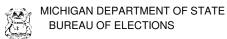
2024200

CANDIDATE COMMITTEE

2. Committee Name CITIZENS TO ELECT MONICA SPARKS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 03/05/2025 Name & Address: DOUGLAS JOHNSON 2741 COLGATE CT SW WYOMING, MI 49519 5. If over \$100.00 cumulative, please provide:	_{\$} 100.00	_{\$} 100.00
Occupation Employer		
Business Address Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/21/2025 Name & Address FRANK LYNN 3446 DEVON DR NE GRAND RAPIDS, MI 49546	\$35.00	_{\$} 35.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 03/21/2025 Name & Address: GARY STARK 2637 HAMPSHIRE BLVD SE EAST GRAND RAPIDS, MI 49506	§ 250.00	_{\$} 250.00
5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer_		
Business Address		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/21/2025 Name & Address DARLENE LEE 1557 BELMAR DR SE GRAND RAPIDS, MI 49508	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	435.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on	
10 39	line 3a of Summary	

Page IU of 39



1. Committee I.D. Number

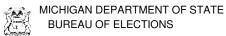
2024200

CANDIDATE COMMITTEE

2. Committee Name CITIZENS TO ELECT MONICA SPARKS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 03/21/2025 Name & Address: LUPE RAMOS-MONTIGNY 977 WALTHAM AVE SE GRAND RAPIDS, MI 49546 5. If over \$100.00 cumulative, please provide:	_{\$} 100.00	_{\$} 100.00
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/21/2025 Name & Address BRENDA BRAME 3446 CHAMBERLAIN AVE SE GRAND RAPIDS, MI 49508	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 03/21/2025 Name & Address: TANYA POWELL-MAY 5790 SABLE RIDGE DR SE KENTWOOD, MI 49508	_{\$} 100.00	_{\$} _100.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/21/2025 CHARISSA HUANG 1317 NORTHLAWN ST NE GRAND RAPIDS, MI 49505	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	300.00	
Grand Total of All Schedules 1A		
(Complete on last page of Schedule)	Enter this total on line 3a of Summary	-

Page II of 39



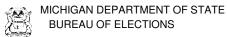
CANDIDATE COMMITTEE

2024200 1. Committee I.D. Number

2. Committee Name CITIZENS TO ELECT MONICA SPARKS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 03/21/2025 Name & Address: ANISSA EDDIE 1235 PROSPECT AVE GRAND RAPIDS, MI 49507	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer Business Address Type of Contribution:		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/21/2025		
Name & Address BARBARA KARENKO-SAXTON 1637 PONTIAC RD SE GRAND RAPIDS, MI 49506	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 Name & Address: EDMUND SPILLERS 3554 RAINTREE CT SE KENTWOOD, MI 49512 5. If over \$100.00 cumulative, please provide:	_{\$} 50.00	_{\$} 50.00
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 04/19/2025 Name & Address THOMAS APPEL 1055 FOREST HILL AVE APT 269 GRAND RAPIDS, MI 49546 5. If over \$100.00 cumulative, please provide: Occupation NOT EMPLOYED Employer	_{\$} 50.00	_{\$} 50.00
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	200.00	
Grand Total of All Schedules 1A		-
(Complete on last page of Schedule)	Enter this total on line 3a of Summary	_l

Page 12 of 39



1. Committee I.D. Number

2024200

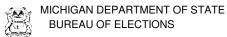
CANDIDATE COMMITTEE

2. Committee Name

CITIZENS TO ELECT MONICA SPARKS

Enter contributor's name and address. If contribution middle initial. Check box to indicate if contribution Committee (PAC) Report all contributions regards	n is from a Political Commi	,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? Y Name & Address: JULIA KELLY 608 PROSPECT AVE SE GRAND RAPIDS, MI 49503	ES 4. Date of Receip	ot 05/05/2025	_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:				
Occupation Em	nployer			
Business Address	· · · · · · · · · · · · · · · · · · ·			
Type of Contribution: V Direct Lo	oan from a person	Fund Raiser		
3. Contribution #2 PAC Receipt? YE	ES 4. Date of Receip	ot 07/21/2025		
Name & Address SHERLYNN JAMES				
1852 PLYMOUTH AVE SE			_{\$} 25.00	_{\$} 25.00
GRAND RAPIDS, MI 49506			\$ <u></u>	<u>\$ 20.00</u>
5. If over \$100.00 cumulative, please provide:				
Occupation Empl	loyer			
Business Address				
Type of Contribution: Direct	pan from a person	Fund Raiser		
3. Contribution # 3 PAC Receipt? YELL YOUNG NAME & Address: DANIEL GOLDBERG 55 OTTAWA AVE SW GRAND RAPIDS, MI 49503 5. If over \$100.00 cumulative, please provide:	/ES 4. Date of Recei	^{pt} 07/24/2025	<u>\$</u> 20.00	_{\$} 20.00
Occupation Em	ployer			
Business Address	. ,			
	oan from a person	Fund Raiser		
Name & Address MAHER W KARADSHEH 3162 POPLAR CREEK DR SE UNIT 303 KENTWOOD, MI 49512 5. If over \$100.00 cumulative, please provide:	_{Employer} ABBY'S P		_{\$} 250.00	_{\$} 250.00
Type of Contribution: Direct	oan from a person	Fund Raiser		
	_	Page Subtotal	395.00	
	Gra	and Total of All Schedules 1A		
10 00	(Comp	ete on last page of Schedule)	Enter this total on line 3a of Summary	J
_ 13 , 39			Dogo	

Page 10 of 05



1. Committee I.D. Number

2024200

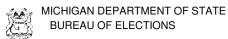
CANDIDATE COMMITTEE

2. Committee Name

CITIZENS TO ELECT MONICA SPARKS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 07/28/2025 Name & Address: MICHIGAN LABORERS POLITICAL LEAGUE POLITICAL ACTION COMMITTEE 1118 CENTENNIAL WAY SUITE 100 LANSING, MI 48917 5. If over \$100.00 cumulative, please provide:	_{\$} 2,500.00	_{\$} 2,500.00
Occupation Employer		
Business Address Type of Contribution:		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 07/31/2025 Name & Address BRANDON DILLON 201 NORWOOD AVE SE GRAND RAPIDS, MI 49506	_{\$} 500.00	_{\$} 750.00
5. If over \$100.00 cumulative, please provide: Occupation MANAGING PARTNER Employer THE WINMATT GROUP Business Address 101 N WASHINGTON SQUARE, #1400, LANSING, MI 48933 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 08/02/2025 Name & Address: SHELLEY WOOTEN 2648 WOODMEADOW DR SE APT 303 GRAND RAPIDS, MI 49546 5. If over \$100.00 cumulative, please provide:	_{\$} 25.00	_{\$} 25.00
Occupation Employer		
Business Address Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 08/07/2025 Name & Address THOMAS APPEL 1055 FOREST HILL AVE APT 269 GRAND RAPIDS, MI 49546 5. If over \$100.00 cumulative, please provide: Occupation NOT EMPLOYED Employer Business Address Type of Contribution: A Receipt? YES 4. Date of Receipt 08/07/2025	_{\$} 100.00	_{\$} _150.00
Type of Contribution: Direct Loan from a person Fund Raiser	0.405.00	1
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	3,125.00 Enter this total on line 3a of Summary	

Page 14 of 39



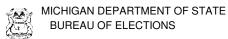
1. Committee I.D. Number

2024200

CANDIDATE COMMITTEE

2. Committee Name CITIZENS TO ELECT MONICA SPARKS

A. Contribution # 1 NAME & Address KIM GATES 7135 MCCORDS AVE SE ALTO, MI 49302 S. If over \$100.00 cumulative, please provide: Cocupation Beniness Address 7190 of Contribution: The over \$100.00 cumulative, please provide: Cocupation Beniness Address CAROL GLANVILLE 1878 STRATFORD LN GRAND RAPIDS, MI 49534 S. If over \$100.00 cumulative, please provide: Cocupation Employer Business Address Type of Contribution # 2 Name & Address Address Type of Contribution # 2 Name & Address S. If over \$100.00 cumulative, please provide: Cocupation Employer Business Address Type of Contribution # 2 Name & Address S. If over \$100.00 cumulative, please provide: Cocupation Employer Business Address Type of Contribution # 2 Name & Address S. If over \$100.00 cumulative, please provide: Cocupation Employer Business Address S. If over \$100.00 cumulative, please provide: Cocupation # 2 Name & Address S. If over \$100.00 cumulative, please provide: Cocupation # 3 Name & Address S. If over \$100.00 cumulative, please provide: Cocupation # 4 Name & Address Type of Contribution: Direct Loan from a person V Fund Raiser Address Type of Contribution: Type of Contribution:	Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Business Address Type of Contribution: Direct	Name & Address: KIM GATES 7135 MCCORDS AVE SE ALTO, MI 49302 5. If over \$100.00 cumulative, please provide:	_{\$} 25.00	_{\$} 50.00
Name & Address CAROL GLANVILLE 1878 STRATFORD LN GRAND RAPIDS, MI 49534 5. If over \$100.00 cumulative, please provide: OccupationEmployer	Business Address		
Business Address Type of Contribution: PDirect Loan from a person Fund Raiser 3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 08/15/2025 KATHLEEN BARNHOUSE	Name & Address CAROL GLANVILLE 1878 STRATFORD LN GRAND RAPIDS, MI 49534	_{\$} 100.00	_{\$} 100.00
Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 3	Occupation Employer		
3. Contribution # 3	Business Address		
Name & Address: KATHLEEN BARNHOUSE 4851 FULLER AVE SE KENTWOOD, MI 49508 5. If over \$100.00 cumulative, please provide: Occupation RETIRED Employer Business Address Type of Contribution: Direct Loan from a person DY Fund Raiser 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 08/20/2025 Name & Address JOYCE GIFFEL 358 RIVERWOOD DR MIDDLEVILLE, MI 49333 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule) Enter this total on	Type of Contribution: Direct Loan from a person Fund Raiser		
Business Address Type of Contribution:	Name & Address: KATHLEEN BARNHOUSE 4851 FULLER AVE SE	§ 50.00	_{\$} 50.00
Business Address Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 08/20/2025 Name & Address JOYCE GIFFEL 358 RIVERWOOD DR MIDDLEVILLE, MI 49333 5. If over \$100.00 cumulative, please provide: Occupation Employer Type of Contribution: Direct Loan from a person Fund Raiser Page Subtotal (Complete on last page of Schedule) Enter this total on	5. If over \$100.00 cumulative, please provide:		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 08/20/2025 Name & Address JOYCE GIFFEL 358 RIVERWOOD DR MIDDLEVILLE, MI 49333 5. If over \$100.00 cumulative, please provide: Occupation Employer Type of Contribution: Direct Loan from a person Fund Raiser Page Subtotal (Complete on last page of Schedule) Enter this total on Enter this total on	Occupation RETIRED Employer		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 08/20/2025 Name & Address JOYCE GIFFEL 358 RIVERWOOD DR MIDDLEVILLE, MI 49333 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution:	Business Address		
Name & Address JOYCE GIFFEL 358 RIVERWOOD DR MIDDLEVILLE, MI 49333 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Loan from a person Fund Raiser Page Subtotal 215.00 Grand Total of All Schedules 1A (Complete on last page of Schedule) Enter this total on	Type of Contribution: Direct Loan from a person Fund Raiser		
Occupation Employer Business Address Type of Contribution: Loan from a person Fund Raiser Page Subtotal 215.00	JOYCE GIFFEL 358 RIVERWOOD DR	_{\$} 40.00	_{\$_} 40.00
Business Address Type of Contribution: Direct Loan from a person Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule) Enter this total on	5. If over \$100.00 cumulative, please provide:		
Type of Contribution: Direct	Occupation Employer		
Grand Total of All Schedules 1A (Complete on last page of Schedule) Enter this total on			
(Complete on last page of Schedule) Enter this total on	Page Subtotal	215.00	
	(Complete on last page of Schedule)	line 3a of Summary	

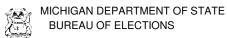


CANDIDATE COMMITTEE

2024200 1. Committee I.D. Number

2. Committee Name CITIZENS TO ELECT MONICA SPARKS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 08/21/2025 NANCY GARBER 21 BAYNTON AVE NE GRAND RAPIDS, MI 49503 5. If over \$100.00 cumulative, please provide: Occupation Employer	_{\$} 100.00	_{\$} 100.00
Business Address Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 08/21/2025 Name & Address ABIGAIL GROFF-BLASZAK 2360 LAKE DR SE GRAND RAPIDS, MI 49506 5. If over \$100.00 cumulative, please provide:	_{\$} 50.00	_{\$} 50.00
Occupation Employer Business Address Type of Contribution: Loan from a person Fund Raiser		
3. Contribution # 3 Name & Address: LINDA BIEZE 2292 BRIDLE CREEK ST SE KENTWOOD, MI 49508	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer Business Address Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 08/23/2025 Name & Address JENNIFER HOOGERHYDE 9726 SHAW CREEK CT NE ROCKFORD, MI 49341	_{\$} 40.00	_{\$} 40.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution: Loan from a person Fund Raiser		
Page Subtotal	215.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 16 of 39	Enter this total on line 3a of Summary Page.	



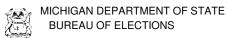
CANDIDATE COMMITTEE

1. Committee I.D. Number 2024200

2. Committee Name

CITIZENS TO ELECT MONICA SPARKS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 08/26/2025 Name & Address: STEPHEN FABER 1845 MEADOWFIELD DR NE GRAND RAPIDS, MI 49505	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser	_	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 08/28/2025 Name & Address QUINTINA JONES 2055 N CROSS CREEK DR SE GRAND RAPIDS, MI 49508	_{\$} 500.00	_{\$} 500.00
5. If over \$100.00 cumulative, please provide:		
Occupation NOT EMPLOYED Employer		
Business Address		
Type of Contribution:		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 08/29/2025 Name & Address: LINDA MARTIN 3640 BRETON RD SE GRAND RAPIDS, MI 49512	_{\$} 250.00	_{\$} 250.00
5. If over \$100.00 cumulative, please provide:		
Occupation NOT EMPLOYED Employer		
Business Address Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 08/29/2025 Name & Address SELMA TUCKER 614 WINDSOR TERRACE SE GRAND RAPIDS, MI 49503	_{\$} 200.00	_{\$} _200.00
5. If over \$100.00 cumulative, please provide:		
Occupation CONSULTANT Employer GSO SOLUTIONS		
Business Address 2660 HORIZON DR SE, 2660 #C4, GRAND RAPIDS, MI 49546		
Type of Contribution:		
Page Subtota	1,000.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 17 of 39		



CANDIDATE COMMITTEE

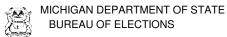
2024200 1. Committee I.D. Number

2. Committee Name

CITIZENS TO ELECT MONICA SPARKS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 08/29/2025 Name & Address: LONNIE POLK 2156 SANDY SHORE DR SE APT 102 GRAND RAPIDS, MI 49508 5. If over \$100.00 cumulative, please provide: Occupation NDEPENDENT CONTRACTOR Employer LASER SPEC INSPECTIONS Business Address 500 REED ST, BELDING, MI 48809	_{\$} 100.00	_{\$} 100.00
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 08/30/2025 Name & Address BARBARA WELCH 3754 BLAZING STAR ST SE KENTWOOD, MI 49512	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 09/02/2025 Name & Address: DAVID BLASZAK 1664 OVERFIELD DR SE GRAND RAPIDS, MI 49508	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/03/2025 Name & Address MATTHEW BUDD 4302 WALNUT HILLS DR KENTWOOD, MI 49512	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	200.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on line 3a of Summary	

Page 10 of 39



CANDIDATE COMMITTEE

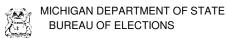
2024200 1. Committee I.D. Number

2. Committee Name

CITIZENS TO ELECT MONICA SPARKS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/03/2025 Name & Address: ANTOINETT CHAPMAN 918 PRINCE ST SE GRAND RAPIDS, MI 49507 5. If over \$100.00 cumulative, please provide: Occupation Employer	_{\$} 50.00	_{\$} 50.00
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/03/2025 Name & Address NICOLE SCHARPHORN 143 DANIEL ST SE GRAND RAPIDS, MI 49507 5. If over \$100.00 cumulative, please provide:	\$ 40.00	_{\$} 40.00
Occupation OPERATIONS ANALYST Employer BROWN & BROWN Business Address 2851 CHARLEVOIX DR SE, SUITE 220, GRAND RAPIDS, MI 49546 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 09/03/2025 Name & Address: MEDINA JONES 3678 BLAZING STAR ST SE KENTWOOD, MI 49512	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide: Occupation Employer		
Business Address Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/04/2025 Name & Address JAMES E VAUGHN 1288 CAMBRIDGE DR GRAND RAPIDS, MI 49506	\$300.00	_{\$} 300.00
5. If over \$100.00 cumulative, please provide: Occupation RETIRED Employer Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	415.00 Enter this total on line 3a of Summary	

Page 19 of 39



1. Committee I.D. Number

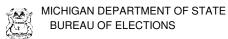
2024200

CANDIDATE COMMITTEE

2. Committee Name CITIZENS TO ELECT MONICA SPARKS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/04/2025 Name & Address: DERRICK COLLINS 160 68TH ST SW KENTWOOD, MI 49548 5. If over \$100.00 cumulative, please provide:	_{\$} 25.00	_{\$} 25.00
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/05/2025 Name & Address JEFF SHUTZ 1115 CADILLAC DR SE GRAND RAPIDS, MI 49506	§ 250.00	_{\$} 250.00
5. If over \$100.00 cumulative, please provide: Occupation NOT EMPLOYED Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 09/05/2025 Name & Address: CAROL PAINE-MCGOVERN 2445 HALL ST SE GRAND RAPIDS, MI 49506	_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/05/2025 Name & Address MARGUERITE DOOLEY 712 DOROTHEA DR RALEIGH, NC 27603	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	425.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on line 3a of Summary	

Page 20 of 39



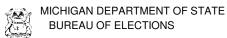
CANDIDATE COMMITTEE

2024200 1. Committee I.D. Number

2. Committee Name CITIZENS TO ELECT MONICA SPARKS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/05/2025 Name & Address: KATRINA WILLIAMS 1321 MANORWOOD DR SE GRAND RAPIDS, MI 49508 5. If over \$100.00 cumulative, please provide:	_{\$} 40.00	_{\$} 40.00
Occupation Employer Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/05/2025 Name & Address AUSTIN MUELLER 2655 GRAND CASTLE BLVD SW GRANDVILLE, MI 49418	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 Name & Address: MICHELLE MCCLOUD 2795 W COBBLESTONE CT. SE KENTWOOD, MI 49512	\$ 500.00	_{\$} 500.00
5. If over \$100.00 cumulative, please provide:		
Occupation KENT COUNTY COMMISSIONER Employer KENT COUNTY Business Address 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/06/2025 WHITNEY BECKER 4341 MILAN AVE SW WYOMING, MI 49509	_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	665.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule) 21 39	Enter this total on line 3a of Summary	

Page 21 of 39



1. Committee I.D. Number

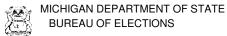
2024200

CANDIDATE COMMITTEE

2. Committee Name CITIZENS TO ELECT MONICA SPARKS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/06/2025 Name & Address: JIM PLUNKETT 4333 ASTORIA AVE SE GRAND RAPIDS, MI 49512	_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/06/2025 Name & Address YILIN WENDLAND-LIU 2691 HAWK RIDGE CT SE KENTWOOD, MI 49508	\$ 100.00	_{\$} _100.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 09/06/2025 Name & Address: LEA TOBAR 2430 HIGHRIDGE LN SE GRAND RAPIDS, MI 49546	_{\$} 100.00	<u>\$ 100.00</u>
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/06/2025 ANTOINETTE THOMPSON 4726 SUMMER CREEK LANE SE GRAND RAPIDS, MI 49508	_{\$} 40.00	_{\$_} 40.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Loan from a person Fund Raiser	0.40.00	1
Page Subtotal	340.00	-
Grand Total of All Schedules 1A (Complete on last page of Schedule)		
20 20	Enter this total on line 3a of Summary	

Page 22 of 39



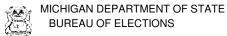
CANDIDATE COMMITTEE

2024200 1. Committee I.D. Number

2. Committee Name CITIZENS TO ELECT MONICA SPARKS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/07/2025 Name & Address: DEXTER FLEMMING 797 HARRISON STREET CANTON, MI 48188 5. If over \$100.00 cumulative, please provide: Occupation NOT EMPLOYED Employer	_{\$} 250.00	_{\$} 250.00
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/07/2025 Name & Address SHEILA E IDE 6014 GRAND RIVER DR GRAND LEDGE, MI 48837	_{\$} 50.00	§ 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 09/08/2025 JEFF WINSTON 1525 FORREST AVE NE GRAND RAPIDS, MI 49505	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer Business Address Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/08/2025 Name & Address JOYCE GIFFEL 358 RIVERWOOD DR MIDDLEVILLE, MI 49333	_{\$} 40.00	_{\$} _80.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser	ľ	
Page Subtotal	390.00	-
Grand Total of All Schedules 1A (Complete on last page of Schedule)		
22 20	Enter this total on line 3a of Summary	

Page 23 of 39



1. Committee I.D. Number

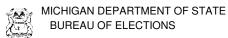
2024200

CANDIDATE COMMITTEE

2. Committee Name CITIZENS TO ELECT MONICA SPARKS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/09/2025 Name & Address: RYAN SCHMIDT 812 ROSEWOOD AVE SE GRAND RAPIDS, MI 49506 5. If over \$100.00 cumulative, please provide:	_{\$} 100.00	_{\$} 100.00
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/10/2025 Name & Address IRA COMBS 4580 EAGLE DR JACKSON, MI 49201	\$ <u>200.00</u>	<u>\$ 200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation FOUNDER Employer GREATER BIBLE WAY TEMPLE Business Address 322 MADISON ST, JACKSON, MI 49202 Type of Contribution: Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 09/11/2025 Name & Address: WYLEA GRIGGS 5357 WYNDTREE LN SE KENTWOOD, MI 49548	\$ 100.00	_{\$} _100.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/11/2025 Name & Address DEBORAH CLANTON 3135 E GATEHOUSE DR GRAND RAPIDS, MI 49546 5. If over \$100.00 cumulative, please provide:	_{\$} 50.00	_{\$_} 50.00
Occupation Employer		
Type of Contribution: Direct Loan from a person Fund Raiser		_
Page Subtotal	450.00	_
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on line 3a of Summary	

Page 24 of 39



1. Committee I.D. Number

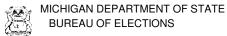
2024200

CANDIDATE COMMITTEE

2. Committee Name CITIZENS TO ELECT MONICA SPARKS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/12/2025 Name & Address: TAMARA LOPEZ 545 28TH ST SW WYOMING, MI 49509	_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/13/2025 Name & Address TAMIKA FOSTER 966 PEACHCREST CT NE GRAND RAPIDS, MI 49505	\$ 100.00	<u>\$ 100.00</u>
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 09/13/2025 Name & Address: KRISTOFER PACHLA 3012 HALL ST SE GRAND RAPIDS, MI 49506	\$ 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution: Direct		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/13/2025 Name & Address DARLA BISHOP 5664 WOODSTOCK DR LANSING, MI 48917	_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	400.00	
Grand Total of All Schedules 1A		-
(Complete on last page of Schedule)	Enter this total on	J
05 00	line 3a of Summary	

Page 25 of 39



1. Committee I.D. Number

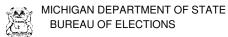
2024200

CANDIDATE COMMITTEE

2. Committee Name CITIZENS TO ELECT MONICA SPARKS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/13/2025 Name & Address: FABLE PRICE 475 W LOVELL ST, 302 KALAMAZOO, MI 49007	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/13/2025 Name & Address TONISHA WADDELL 528 ELLIOTT ST SE GRAND RAPIDS, MI 49507	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 09/13/2025 Name & Address: CHERRELLE SINGLETON 1926 WATERBURY DR SE GRAND RAPIDS, MI 49507 5. If over \$100.00 cumulative, please provide:	\$25.00	_{\$} 25.00
Occupation Employer		
Rusiness Address		
Type of Contribution: Direct Loan from a person Fund Raiser	_	
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/13/2025 Name & Address DEBORAH DIAZ 913 FOURTH ST NW GRAND RAPIDS, MI 49504	_{\$} 20.00	_{\$} 20.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	145.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on	

Page 26 of 39



1. Committee I.D. Number

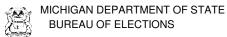
2024200

CANDIDATE COMMITTEE

2. Committee Name CITIZENS TO ELECT MONICA SPARKS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/13/2025 Name & Address: AMAAD HARDY 4785 KALAMAZOO AVE GRAND RAPIDS, MI 49508	_{\$} 20.00	_{\$} 20.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/14/2025 Name & Address BRANDON DILLON 201 NORWOOD AVE SE GRAND RAPIDS, MI 49506	_{\$} 475.00	_{\$} 1,225.00
5. If over \$100.00 cumulative, please provide: Occupation MANAGING PARTNER Employer THE WINMATT GROUP Business Address 101 N WASHINGTON SQUARE, #1400, LANSING, MI 48933 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 09/14/2025 Name & Address: JAMAR MCDONALD 3188 RIVERVIEW DR 1B WALKER, MI 49544 5. If over \$100.00 cumulative, please provide:	_{\$} 25.00	_{\$} 25.00
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/14/2025 Name & Address JERMALE EDDIE 1235 PROSPECT AVE SE GRAND RAPIDS, MI 49507	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	545.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on	
07 00	line 3a of Summary	

Page 27 of 39



1. Committee I.D. Number

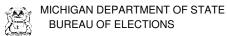
2024200

CANDIDATE COMMITTEE

2. Committee Name CITIZENS TO ELECT MONICA SPARKS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/15/2025 Name & Address: SHIRLEY BERGER 2136 HYDE PARK DETROIT, MI 48307 5. If over \$100.00 cumulative, please provide: Occupation Employer	\$ 100.00	_{\$} 100.00
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/15/2025 Name & Address CRYSTAL HARDLEY 4257 KALAMAZOO AVE SE GRAND RAPIDS, MI 49508 5. If over \$100.00 cumulative, please provide:	_{\$} 100.00	_{\$} 100.00
Occupation Employer Business Address Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 09/15/2025 VANESSA GREENE 5939 BARCROFT DR SW GRANDVILLE, MI 49418	_{\$} 100.00	_{\$} 100.00
If over \$100.00 cumulative, please provide: Occupation Employer		
Business Address Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 09/15/2025 Name & Address RICHARD MORGAN 2049 MELVIN ST SW WYOMING, MI 49519	_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser	Γ	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on	
28 39	line 3a of Summary	

Page **20** of **39**



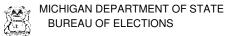
ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

2024200 1. Committee I.D. Number

2. Committee Name CITIZENS TO ELECT MONICA SPARKS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/15/2025 Name & Address: KIMBERLY SLAIKEU 3115 RIDGES BEND UNIT 203 GRAND RAPIDS, MI 49546 5. If over \$100.00 cumulative, please provide:	_{\$} 25.00	_{\$} 25.00
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/15/2025 Name & Address PHILPAC 2615 HALL ST SE GRAND RAPIDS, MI 49506	_{\$} 1,000.00	_{\$} 1,000.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 09/16/2025 Name & Address: MICHIGAN REGIONAL COUNCIL OF CARPENTERS POLITICAL ACTION COMMITTEE 11687 AMERICAN AVE SUITE 200 DETROIT, MI 48204	_{\$} 2,000.00	_{\$} 2,000.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/17/2025 RANDY SOUTHERN 2029 PLYMOUTH AVE SE GRAND RAPIDS, MI 49506	_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution: Loan from a person Fund Raiser		
Page Subtotal	3,125.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on	

Page 29 of 39



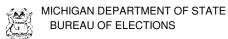
CANDIDATE COMMITTEE

2024200 1. Committee I.D. Number

2. Committee Name CITIZENS TO ELECT MONICA SPARKS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/17/2025 Name & Address: LISA RENE' NORRIS 3942 CHAMBERLAIN AVE SE GRAND RAPIDS, MI 49508	_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/17/2025 Name & Address ARLEN-DEAN GADDY 1658 ROSEWOOD AVE SE	_s 100.00	_{\$} 100.00
GRAND RAPIDS, MI 49506	\$ 100100	<u>\$ 100.00</u>
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 09/17/2025 Name & Address: NANCY GREEN 2431 FOREST HILL AVE SE #2104 GRAND RAPIDS, MI 49546 5. If over \$100.00 cumulative, please provide:	_{\$} 500.00	_{\$} 500.00
Occupation NOT EMPLOYED Employer		
Business Address Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/18/2025 Name & Address APRIL RUIZ 3325 BROOK TRAILS SE GRAND RAPIDS, MI 49508	_{\$} 15.00	_{\$} 15.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	715.00	
Grand Total of All Schedules 1A		
(Complete on last page of Schedule)	Enter this total on line 3a of Summary	- '

Page 30 of 39



1. Committee I.D. Number

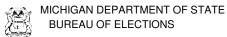
2024200

CANDIDATE COMMITTEE

2. Committee Name CITIZENS TO ELECT MONICA SPARKS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/18/2025 Name & Address: ADRIANE JOHNSON 624 BENJAMIN AVE SE GRAND RAPIDS, MI 49506 5. If over \$100.00 cumulative, please provide:	_{\$} 25.00	_{\$} 25.00
Occupation Employer Business Address Type of Contribution:		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/19/2025 Name & Address RAYNARD ROSS 3810 KINGSWAY CT SE GRAND RAPIDS, MI 49508 5. If over \$100.00 cumulative, please provide:	_{\$} 75.00	_{\$} 75.00
Occupation Employer Business Address Type of Contribution:		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 09/19/2025 KAYLA MORGAN 427 RUMSEY ST SW GRAND RAPIDS, MI 49503	_{\$} 25.00	_{\$} 25.00
If over \$100.00 cumulative, please provide: Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/19/2025 Name & Address PATRICK MILES 2856 REEDS LAKE BLVD SE EAST GRAND RAPIDS, MI 49506	_{\$} 50.00	_{\$} 50.00
If over \$100.00 cumulative, please provide: Occupation Employer		
Business Address Type of Contribution: Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	175.00 Enter this total on line 3a of Summary	

Page 31 of 39



1. Committee I.D. Number

2024200

CANDIDATE COMMITTEE

2. Committee Name

CITIZENS TO ELECT MONICA SPARKS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/19/2025 Name & Address: NICKOLAS WISMER 5882 LEISURE S DR SE GRAND RAPIDS, MI 49548 5. If over \$100.00 cumulative, please provide:	_{\$} 25.00	_{\$} 25.00
Occupation Employer		
Business Address Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/19/2025 Name & Address SKOT WELCH 3754 BLAZING STAR ST SE KENTWOOD, MI 49512	_{\$} 250.00	§ 350.00
5. If over \$100.00 cumulative, please provide: Occupation SELF EMPLOYED CONSULTANT Employer GLOBAL BRIDGEBUILDERS Business Address 3754 BLAZING STAR ST SE, KENTWOOD, MI 49512 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 09/20/2025 Name & Address: NICOLE SCHARPHORN 143 DANIEL ST SE GRAND RAPIDS, MI 49507 5. If over \$100.00 cumulative, please provide:	_{\$} 35.00	_{\$} 75.00
Occupation Employer		
Business Address Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/21/2025 SHANELLE WHITE 172 S WEST ST LOWELL, MI 49331	_{\$} 50.00	_{\$} _50.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution:		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 32 of 39	Enter this total on line 3a of Summary Page.	



1. Committee I.D. Number

2024200

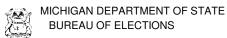
CANDIDATE COMMITTEE

2. Committee Name

CITIZENS TO ELECT MONICA SPARKS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/23/2025 Name & Address: RENARD JOHNSON 3393 MESA VERDE CT SE KENTWOOD, MI 49512 5. If over \$100.00 cumulative, please provide: Occupation BONDSMAN Employer J&J BAIL BONDS Business Address 1940 EASTERN AVE SE, GRAND RAPIDS, MI 49507	_{\$} 500.00	_{\$} 500.00
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/23/2025 Name & Address RACHEL HOOD 28 GUILD ST NE GRAND RAPIDS, MI 49505	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 09/24/2025 Name & Address: MONIQUE COLLIER-JOHNSON 3138 CHAMBERLAIN AVE SE GRAND RAPIDS, MI 49508 5. If over \$100.00 cumulative, please provide:	_{\$} 25.00	_{\$} 25.00
Occupation Employer		
Business Address Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/25/2025 Name & Address LATASHA BLACK 2136 FOREST HILL AVE SE GRAND RAPIDS, MI 49546	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	625.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on line 3a of Summary	

Page 33 of 39



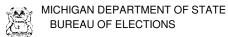
2024200 1. Committee I.D. Number

CANDIDATE COMMITTEE

2. Committee Name CITIZENS TO ELECT MONICA SPARKS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/27/2025 Name & Address: JUSTIN SHELDON 2202 NEW TOWN DR GRAND RAPIDS, MI 49525 5. If over \$100.00 cumulative, please provide:	_{\$} 250.00	_{\$} 250.00
Occupation COMMUNITY ORGANIZER Employer SELF EMPLOYED		
Business Address 2202 NEW TOWN DR, GRAND RAPIDS, MI 49525		
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/27/2025		
Name & Address SHAN ABBAS		
2202 NEW TOWN DR NE	\$ 250.00	_{\$} 250.00
GRAND RAPIDS, MI 49525	Ψ	\$ <u></u>
5. If over \$100.00 cumulative, please provide:		
Occupation MEDICAL DOCTOR Employer SPECTRUM HEALTH MEDICAL GROUP		
Business Address 100 MICHIGAN ST NE, GRAND RAPIDS, MI 49503		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 Name & Address: MI RURAL PAC P.O. BOX 834	_{\$} 250.00	_{\$} 250.00
MANISTEE, MI 49660		
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/28/2025 RON DRAAYER 2931 WILDFLOWER LN SE GRAND RAPIDS, MI 49512	_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation NOT EMPLOYED Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	850.00	
Grand Total of All Schedules 1A		
(Complete on last page of Schedule)	Enter this total on line 3a of Summary	- '

Page 34 of 39



2024200 1. Committee I.D. Number

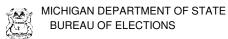
CANDIDATE COMMITTEE

2. Committee Name CITIZENS TO ELECT MONICA SPARKS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 10/02/2025 Name & Address: MEOCHIA THOMPSON 5410 EFFINGHAM DR SE GRAND RAPIDS, MI 49508 5. If over \$100.00 cumulative, please provide: Occupation Employer	_{\$} 50.00	_{\$} 50.00
Business Address Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/02/2025 Name & Address BARBARA VAN OSTENBERG 2431 FOREST HILL AVE SE #1204 GRAND RAPIDS, MI 49546 5. If over \$100.00 cumulative, please provide: Occupation Employer	_{\$} 50.00	_{\$} 50.00
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 10/03/2025 Name & Address: NICOLE SCHARPHORN 143 DANIEL ST SE GRAND RAPIDS, MI 49507	_{\$} 40.00	_{\$} 115.00
5. If over \$100.00 cumulative, please provide:		
Occupation OPERATIONS ANALYST Employer BROWN & BROWN Business Address 2851 CHARLEVOIX DR SE, SUITE 220, GRAND RAPIDS, MI 49546 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 10/04/2025 Name & Address JOHN CONSIDINE 4286 GREENBRIER COURT SE GRAND RAPIDS, MI 49546	_{\$} 15.00	_{\$} 15.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	155.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on line 3a of Summary	

Page 35 of 39

Page.

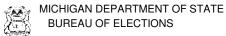


CANDIDATE COMMITTEE

2024200 1. Committee I.D. Number

2. Committee Name CITIZENS TO ELECT MONICA SPARKS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 10/04/2025 Name & Address: CAROL TRIEBEL 2431 FOREST HILL AVE SE APT 1303 GRAND RAPIDS, MI 49546 5. If over \$100.00 cumulative, please provide:	_{\$} 100.00	_{\$} 100.00
Occupation Employer		
Business Address Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/06/2025 Name & Address DEBRA REECE 4148 KENTRIDGE DR SE GRAND RAPIDS, MI 49508	\$ 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:		
3. Contribution #3 Name & Address: SAMIR KARADSHEH 3445 BRETON VALLEY DR SE GRAND RAPIDS, MI 49512	§ 500.00	_{\$} 500.00
5. If over \$100.00 cumulative, please provide:		
Occupation NOT EMPLOYED Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/08/2025 Name & Address JEFFREY THOMAS 447 CEDAR ST NE GRAND RAPIDS, MI 49503	_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	800.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this to the	
Page 36 of 39	Enter this total on line 3a of Summary Page.	



1. Committee I.D. Number

2024200

CANDIDATE COMMITTEE

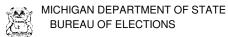
2. Committee Name

CITIZENS TO ELECT MONICA SPARKS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 10/10/2025 Name & Address: KATE WOLTERS 11307 OLD HARBOUR RD NORTH PALM BEACH, FL 33408 5. If over \$100.00 cumulative, please provide: Occupation NOT EMPLOYED Employer	_{\$} 25.00	_{\$} 25.00
Business Address Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/15/2025 Name & Address JOSHUA FERGUSON 811 EMERALD AVE NE GRAND RAPIDS, MI 49503	_{\$} 1,225.00	_{\$} 1,225.00
5. If over \$100.00 cumulative, please provide: Occupation ORGANIZER Employer 270 STRATEGIES Business Address 207 E OHIO, CHICAGO, IL 60611 Type of Contribution: Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 10/17/2025 Name & Address: KATE WOLTERS 11307 OLD HARBOUR RD NORTH PALM BEACH, FL 33408	\$500.00	_{\$} 525.00
5. If over \$100.00 cumulative, please provide: Occupation NOT EMPLOYED Employer Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/18/2025 DANIEL HESSE 117 KNAPP ST NE GRAND RAPIDS, MI 49505 5. If over \$100.00 cumulative, please provide:	_{\$} 100.00	_{\$} 100.00
Occupation Employer Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser	_	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	1,850.00 Enter this total on line 3a of Summary	

Page 37 of 39

Page.



CANDIDATE COMMITTEE

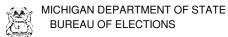
2024200 1. Committee I.D. Number

2. Committee Name CITIZENS TO ELECT MONICA SPARKS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 10/18/2025 Name & Address: DARLENE LEE 1557 BELMAR DR SE GRAND RAPIDS, MI 49508 5. If over \$100.00 cumulative, please provide: Occupation Employer	_{\$} 25.00	_{\$} 75.00
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/20/2025 Name & Address CONSTANCE LIGHTHALL 11479 BOWERS DR NE LOWELL, MI 49331	_{\$} 375.00	_{\$} 375.00
5. If over \$100.00 cumulative, please provide: Occupation NOT EMPLOYED Employer		
Business Address		
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 10/22/2025 Name & Address: JAMES E VAUGHN 1288 CAMBRIDGE DR GRAND RAPIDS, MI 49506	\$200.00	_{\$} 200.00
5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer		
Business Address		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/24/2025 Name & Address SUGAR BOLEN 60TH ST SE KENTWOOD, MI 49508	_{\$} 25.00	_{\$_} 25.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	625.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		
38 30	Enter this total on line 3a of Summary	

Page 38 of 39

Page.



ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

2024200 1. Committee I.D. Number

2. Committee Name

CITIZENS TO ELECT MONICA SPARKS

Enter contributor's nammiddle initial. Check b Committee (PAC) Repr	ox to indicate if con	tribu	bution is from an individual, enter last name, first name, ion is from a Political Committee or an Independent rdless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: RON DRAAYEF 2931 WILDFLO GRAND RAPID	WER LN SE S, MI 49512		YES 4. Date of Receipt 10/24/2025	_{\$} 100.00	_{\$} 200.00
5. If over \$100.00 cum Occupation NOT E			e: Employer		
Business Address					
	✓ Direct		Loan from a person Fund Raiser		
3. Contribution #2 Name & Address	PAC Receipt?		YES 4. Date of Receipt		
				\$	\$
5. If over \$100.00 cum	ulative, please pro	vide	:	Click Here fo	r Memo Itemization
Occupation		_ En	ployer		
Business Address					
Type of Contribution:	Direct		Loan from a person Fund Raiser		
3. Contribution # 3 Name & Address:	PAC Receipt?		YES 4. Date of Receipt		
				\$	\$
5. If over \$100.00 cum	ulative, please pro	vide	:	Click Here for	Memo Itemization
Occupation		_ E	mployer		
Business Address					
Type of Contribution:	Direct		Loan from a person Fund Raiser		
Contribution # 4 Name & Address	PAC Receipt?		YES 4. Date of Receipt		
				\$	\$
5. If over \$100.00 cum	ulative, please pro	vide	:	Click Hara for	Memo Itemization
Occupation		_	Employer	Glick Here loi	Memo Remization
Business Address					
Type of Contribution:	Direct		Loan from a person Fund Raiser		
			Page Subtotal	100.00	
			Grand Total of All Schedules 1A	30,015.00	_
			(Complete on last page of Schedule)	Enter this total on	_!

 $_{\text{Page}}\underline{39}_{\text{of}}\underline{39}$

line 3a of Summary Page.



1. Committee I. D. Number 2024200

2. Committee Name CITIZENS TO ELECT MONICA SPARKS

CANDIDATE COMIN	IIIIEE 2. Committee Name		
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions. Contribution # 1 PAC Receipt? Yes Name & Address: KENNY JACKSON	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased 4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
3907 KENTRIDGE DR SE GRAND RAPIDS, MI 49508 If over \$100.00 cumulative, please provide: Occupation: RETIRED Employer Name & Business Address:	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others- LOAN Description DECORATIONS AND FOOD FOR EVENT 5. Date Of Receipt: 03/21/2025 6. Vendor Name & Address:		*
Fund Raiser Contribution Contribution # 2 PAC Receipt? Yes Name & Address KATHLEEN JACKSON 3907 KENTRIDGE DR SE GRAND RAPIDS, MI 49508 If over \$100.00 cumulative, please provide: Occupation: RETIRED Employer Name & Address:	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description FOOD FOR EVENT 5. Date Of Receipt: 03/21/2025 6. Vendor Name & Address:	,000.00	1,000.00
✓ Fund Raiser Contribution			
Contribution #3 PAC Receipt? Yes Name & Address: ANDRE POSEY 1018 WATKINS ST SE GRAND RAPIDS, MI 49507 If over \$100.00 cumulative, please provide: Occupation: SELF-EMPLOYED Employer Name & Address: ANDRE POSEY 1018 WATKINS ST SE, GRAND RAPIDS, MI 49507 Fund Raiser Contribution	4.	50.00 _{\$}	250.00
- Transfer Continuation	Page Subtotal	2,250.00	0.00
	Grand Total of all Schedules 1-IK (Complete on last page of Schedule)		



1. Committee I. D. Number 2024200

2 Committee Name CITIZENS TO ELECT MONICA SPARKS

CANDIDATE COMM	IITTEE 2. Committee Name 311122113 1 3 22		
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: BRITTANY HENNING 3122 FULLER AVE NE GRAND RAPIDS, MI 49505 If over \$100.00 cumulative, please provide: Occupation: INSURANCE AGENT Employer Name & Business Address: FARMERS INSURANCE GROUP 5665 N KRAFT LAKE DR, CALEDONIA, MI 49316 Fund Raiser Contribution	4. Sendorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description EVENT SERVICES 5. Date Of Receipt: 03/21/2025 6. Vendor Name & Address: MORENA'S EVENT VENUE 4470 BRETON RD SE, KENTWOOD, MI 49508	250.00	250.00
Contribution # 2 Name & Address PAC Receipt? Yes Yes If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description 5. Date Of Receipt: 6. Vendor Name & Address:	\$ ck Here for Memo It	
Fund Raiser Contribution		sk i loto for injenio ik	oZato
Contribution #3 PAC Receipt? Yes Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Fund Raiser Contribution	4.	9.20 \$	5,112.99
	Page Subtotal	279.20	250.00
	Grand Total of all Schedules 1-lk (Complete on last page of Schedule)		



1. Committee I. D. Number 2024200

2. Committee Name CITIZENS TO ELECT MONICA SPARKS

CANDIDATE COMIN	IIIIEE 2. Committee Name		
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions. Contribution # 1 PAC Receipt? Yes Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Business Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Fund Raiser Contribution Contribution # 2 PAC Receipt? Yes Name & Address	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased 4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description CAMPAIGN POSTCARDS 5. Date Of Receipt: 03/31/2025 6. Vendor Name & Address: SWIFT PRINTING 404 BRIDGE ST NW, GRAND RAPIDS, MI 49504 4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description Services Purchased by Candidate or Others-LOAN Description Services Purchased by Candidate or Others-LOAN	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
·	5. Date Of Receipt:		
Employer Name & Address:	6. Vendor Name & Address:		
	Clic	ck Here for Memo It	emization
Fund Raiser Contribution			
Contribution #3 PAC Receipt? Yes Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Fund Raiser Contribution	4.	00.30 \$	7,390.42
	Page Subtotal	321.43	0.00
	Grand Total of all Schedules 1-IK (Complete on last page of Schedule)		

Enter this total on line 6 of Summary Page

 $_{Page}$ 3 of 33



1. Committee I. D. Number 2024200

2 Committee Name CITIZENS TO ELECT MONICA SPARKS

CANDIDATE COMM	IITTEE 2. Committee Name		
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box)5. Date of Receipt6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Business Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Fund Raiser Contribution	4. Services Donated or Loaned Services Donated Services Donated Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others Occupition FOOD FOR EVENT 5. Date Of Receipt: 04/30/2025 6. Vendor Name & Address: GORDON FOOD SERVICE 4990 CLAY AVE SW, GRAND RAPIDS, MI 49548	104.38	\$ 9,494.80
Contribution # 2 PAC Receipt? Yes Name & Address MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☑ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others-LOAN Description YARD SIGNS 5. Date Of Receipt: 05/12/2025 6. Vendor Name & Address: ABBYS PRINTING 3109 BROADMOOR AVE SE, GRAND RAPIDS, MI 49512	296.80_ s	10,791.60
Contribution #3 PAC Receipt? Yes Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Fund Raiser Contribution	4.	53.17 _{\$}	11,044.77
	Page Subtotal	654.35	0.00
	Grand Total of all Schedules 1-IK (Complete on last page of Schedule)		



1. Committee I. D. Number 2024200

CANDIDATE COMMITTEE

2. Committee Name CITIZENS TO ELECT MONICA SPARKS

CANDIDATE COMIN			
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE	Goods or Services Purchased by Candidate or Others	103.23	11,148.00
KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Business Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Fund Raiser Contribution	Goods or Services Purchased by Candidate or Others- LOAN Description FOOD FOR EVENT 5. Date Of Receipt: 05/16/2025 6. Vendor Name & Address: MEIJER 5531 28TH ST SE, GRAND RAPIDS, MI 49512		
Contribution # 2 PAC Receipt? Yes Name & Address MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503	4.	89.80	11,837.80
Contribution #3 PAC Receipt? Yes Name & Address:	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated \$ Goods or Services Purchased by Candidate or Others	\$	
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	Goods or Services Purchased by Candidate or Others- LOAN Description 5. Date Of Receipt: 6. Vendor Name & Address:	ck Here for Memo It	temization
Fund Raiser Contribution	Page Subtotal	293.03	0.00
	Grand Total of all Schedules 1-lk (Complete on last page of Schedule)	(

Enter this total on line 6 of Summary Page

Page 5 of 33



1. Committee I. D. Number 2024200

2 Committee Name CITIZENS TO ELECT MONICA SPARKS

CANDIDATE COMM	IITTEE 2. Committee Name 311122113 1 3 21		
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box)5. Date of Receipt6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Business Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Fund Raiser Contribution	4. Services Donated or Loaned Services Donated Services Donated Services Donated Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others Signs 5. Date Of Receipt: 05/22/2025 6. Vendor Name & Address: ABBYS PRINTING 3109 BROADMOOR AVE SE, GRAND RAPIDS, MI 49512	556.50	\$ 12,394.30
Contribution # 2 PAC Receipt? Yes Name & Address MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☑ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others-LOAN Description CAMPAIGN LITERATURE 5. Date Of Receipt: 05/28/2025 6. Vendor Name & Address: LAWSON PRINTERS 685 W COLUMBIA AVE, BATTLE CREEK, MI 49015	862.84	\$ 14,102.14
Contribution #3 PAC Receipt? Yes Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated \$2 ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others-LOAN Description FOOD FOR EVENT 5. Date Of Receipt: 06/10/2025 6. Vendor Name & Address: SAM'S CLUB 4326 28TH ST SE, GRAND RAPIDS, MI 49512	274.25	15,376.39
	Page Subtota	1,693.59	0.00
	Grand Total of all Schedules 1- (Complete on last page of Schedul		



ITEMIZED IN-KIND CONTRIBUTIONS

ITEMIZED IN-KIND CONTR	RIBUTIONS		
SCHEDULE 1-IK	1. Committee I. D. Number 2024200		
CANDIDATE COMM	2. Committee Name CITIZENS TO ELI	ECT MONIC	CA SPARKS
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box)5. Date of Receipt6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description FOOD FOR EVENT	52.99	_{\$} 15,429.38
Employer Name & Business Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Fund Raiser Contribution	5. Date Of Receipt: 06/11/2025 6. Vendor Name & Address: GORDON FOOD SERVICE 4990 CLAY AVE SW, GRAND RAPIDS, MI 49548		
Contribution # 2 PAC Receipt? Yes Name & Address MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN	5.70	\$ 15,435.08
If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503	Description FOOD FOR EVENT 5. Date Of Receipt: 06/11/2025 6. Vendor Name & Address: WALMART 355 54TH ST SW, GRAND RAPIDS, MI 49548		
Contribution #3 PAC Receipt? Yes Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503	4.	99 .	15,440.07
	Dec. 2 to 1	00.00	0.00
	Page Subtotal	63.68	0.00
	Grand Total of all Schedules 1-IK (Complete on last page of Schedule)		



1. Committee I. D. Number 2024200

2. Committee Name CITIZENS TO ELECT MONICA SPARKS

CANDIDATE COMIV	III I E 2. Committee Name		
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box)5. Date of Receipt6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Business Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Fund Raiser Contribution	4. Sendorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description RENT 5. Date Of Receipt: 06/16/2025 6. Vendor Name & Address: JACK VOSS 4835 EASTERN AVE SE, KENTWOOD, MI 49508	500.00	16,440.07
Contribution # 2 PAC Receipt? Yes Name & Address MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☑ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others-LOAN Description STAMPS 5. Date Of Receipt: 06/28/2025 6. Vendor Name & Address: UNITED STATES POSTAL SERVICE 1680 44TH ST SE, GRAND RAPIDS, MI 49508	46.00	17,586.07
Contribution #3 PAC Receipt? Yes Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Fund Raiser Contribution	4.	63.36 _{\$}	17,849.43
	Page Subtotal	909.36	0.00
	Grand Total of all Schedules 1-IK		



1. Committee I. D. Number 2024200

2 Committee Name CITIZENS TO ELECT MONICA SPARKS

CANDIDATE COMM	IITTEE 2. Committee Name 311122113 1 3 2 2 2		
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box)5. Date of Receipt6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: TODD HARRIS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Business Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Fund Raiser Contribution	4.	15.88	15.88
Contribution # 2 PAC Receipt? Yes Name & Address MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☑ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- LOAN Description MAILING LABELS 5. Date Of Receipt: 07/03/2025 6. Vendor Name & Address: FEDEX 3614 28TH ST SE, KENTWOOD, MI 49512	9.82	17,869.25
Contribution #3 PAC Receipt? Yes Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated \$ 41 ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- LOAN Description CAMPAIGN EVENT SUPPLIES 5. Date Of Receipt: 07/03/2025 6. Vendor Name & Address: GODWIN HARDWARE AND PLUMBING 3703 DIVISION AVE S, GRAND RAPIDS, MI 49548	.80	17,911.05
	Page Subtotal	77.50	15.88
	Grand Total of all Schedules 1-IK		

Enter this total on line 6 of Summary Page

(Complete on last page of Schedule)

 $_{Page}9$ of 33



2 Committee Name CITIZENS TO ELECT MONICA SPARKS

CANDIDATE COMM	IITTEE 2. Committee Name		
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Business Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Fund Raiser Contribution Contribution # 2 PAC Receipt? Yes	4. Sendorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description CAMPAIGN EVENT SUPPLIES 5. Date Of Receipt: 07/03/2025 6. Vendor Name & Address: GODWIN HARDWARE AND PLUMBING 3703 DIVISION AVE S, GRAND RAPIDS, MI 49548 4. Endorsement or Guarantee of Bank Loan	26.49	17,937.54
Name & Address COMFORT LOVE 2038 CYPRESS ST SW WYOMING, MI 49519 If over \$100.00 cumulative, please provide: Occupation: SELF EMPLOYED, BUSINESS OWNER Employer Name & Address: COMFORT AND ADAM 2038 CYPRESS ST SW, WYOMING, MI 49519 Fund Raiser Contribution	Goods Donated or Loaned Services Donated	250.00	250.00
Contribution #3 PAC Receipt? Yes Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated \$ 5 ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others-LOAN Description RENT 5. Date Of Receipt: 07/08/2025 6. Vendor Name & Address: JACK VOSS 4835 EASTERN AVE SE, KENTWOOD, MI 49508	00.00 _{\$}	18,937.54
	Page Subtota	770.40	250.00
	Grand Total of all Schedules 1-II	κl	1

Enter this total on line 6 of Summary Page

(Complete on last page of Schedule)



1. Committee I. D. Number 2024200

2 Committee Name CITIZENS TO ELECT MONICA SPARKS

CANDIDATE COMM	IITTEE 2. Committee Name 311122113 13 221		
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box)5. Date of Receipt6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Business Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Fund Raiser Contribution	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others DIGITAL ADVERTISEMENT 5. Date Of Receipt: 07/14/2025 6. Vendor Name & Address: META PLATFORMS, INC 1 META WY, MENLO PARK, CA 94025	124.00	_{\$} 19,561.54
Contribution # 2 PAC Receipt? Yes Name & Address MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☑ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others-LOAN Description MAILING LABELS 5. Date Of Receipt: 07/15/2025 6. Vendor Name & Address: FEDEX 3614 28TH ST SE, KENTWOOD, MI 49512	4.03	\$ 19,595.57
Contribution #3 PAC Receipt? Yes Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others-LOAN ☐ FOOD FOR EVENT 5. Date Of Receipt: 07/18/2025 6. Vendor Name & Address: ☐ GORDON FOOD SERVICE ☐ 7434 COTTONWOOD DR, ☐ JENISON, MI 49428	9.62	19,695.19
	Page Subtotal	257.65	0.00
	Grand Total of all Schedules 1-IK		

Enter this total on line 6 of Summary Page

(Complete on last page of Schedule)

1. Committee I. D. Number 2024200

2 Committee Name CITIZENS TO ELECT MONICA SPARKS

CANDIDATE COMM	IITTEE 2. Committee Name 311122113 13 221		
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box)5. Date of Receipt6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Business Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Fund Raiser Contribution	4.	2,500.00	\$ 2,520.00
Contribution # 2 PAC Receipt? Yes Name & Address MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☑ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others-LOAN Description STAFF PAY 5. Date Of Receipt: 03/07/2025 6. Vendor Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE, KENTWOOD, MI 49508	500.00 ·	\$ 3,040.00
Contribution #3 PAC Receipt? Yes Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated \$ 54 ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- LOAN Description PRINTING 5. Date Of Receipt: 03/13/2025 6. Vendor Name & Address: SWIFT PRINTING 404 BRIDGE ST NW, GRAND RAPIDS, MI 49504	13.79	3,583.79
	Page Subtotal	3,543.79	0.00
	Grand Total of all Schedules 1-IK (Complete on last page of Schedule)		

1. Committee I. D. Number 2024200

2 Committee Name CITIZENS TO ELECT MONICA SPARKS

CANDIDATE COMM	IITTEE 2. Committee Name		
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box)5. Date of Receipt6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Business Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Fund Raiser Contribution	4.	500.00	\$ 4,083.79
Contribution # 2 Name & Address MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description STAFF PAY 5. Date Of Receipt: 03/21/2025 6. Vendor Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE, KENTWOOD, MI 49508	600.00 ⁴	4,583.79
Contribution #3 PAC Receipt? Yes Name & Address: BRITNEY HOSKINS 42060 TWINING DR STERLING HEIGHTS, MI 48313 If over \$100.00 cumulative, please provide: Occupation: BUSINESS OWNER Employer Name & Address: MORENAS EVENT VENUE 4470 BRETON RD SE, KENTWOOD, MI 49508	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated \$ 1,4 ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- LOAN Description VENUE PAYMENT CONTRIBUTION 5. Date Of Receipt: 03/21/2025 6. Vendor Name & Address: MORENAS EVENT VENUE 4470 BRETON RD SE, KENTWOOD, MI 49508	<u>200.00</u> \$	1,200.00
	Page Subtotal	2,200.00	1,200.00
	Grand Total of all Schedules 1-IK		

Enter this total on line 6 of Summary Page

(Complete on last page of Schedule)

 $_{Page}$ 13 $_{of}$ 33



2 Committee Name CITIZENS TO ELECT MONICA SPARKS

CANDIDATE COMM	IITTEE 2. Committee Name		
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box)5. Date of Receipt6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Business Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Fund Raiser Contribution	4. Sendorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description STAFF PAY 5. Date Of Receipt: 03/28/2025 6. Vendor Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE, KENTWOOD, MI 49508	500.00	5,083.79
Contribution # 2 PAC Receipt? Yes Name & Address MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☑ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- LOAN Description PRINTING 5. Date Of Receipt: 04/01/2025 6. Vendor Name & Address: ABBY'S PRINTING 3109 BROADMOOR AVE SE, GRAND RAPIDS, MI 49512	1,956.00 s	7,190.12
Contribution #3 PAC Receipt? Yes Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others-LOAN Description STAFF PAY 5. Date Of Receipt: 04/04/2025 6. Vendor Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE, KENTWOOD, MI 49508	00.00 \$	7,890.42
-	Page Subtotal	2,956.00	0.00
	Grand Total of all Schedules 1-Ik (Complete on last page of Schedule	<	



1. Committee I. D. Number 2024200

2 Committee Name CITIZENS TO ELECT MONICA SPARKS

CANDIDATE COMM	IITTEE 2. Committee Name		
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box)5. Date of Receipt6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Business Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Fund Raiser Contribution	4.	500.00	8,390.42
Contribution # 2 PAC Receipt? Yes Name & Address MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508	Goods or Services Purchased by Candidate or Others- LOAN	500.00	8,890.42
If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Fund Raiser Contribution	Description STAFF PAY 5. Date Of Receipt: 04/18/2025 6. Vendor Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE, KENTWOOD, MI 49508		
Contribution #3 PAC Receipt? Yes Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503	4.	00.00 _{\$}	9,390.42
	Page Subtotal	1,500.00	0.00
	Grand Total of all Schedules 1-Ik (Complete on last page of Schedule)		



1. Committee I. D. Number 2024200

2 Committee Name CITIZENS TO ELECT MONICA SPARKS

CANDIDATE COMM	IITTEE 2. Committee Name 311122113 13 221		
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box)5. Date of Receipt6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Business Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Fund Raiser Contribution	4.	500.00	9,994.80
Contribution # 2 PAC Receipt? Yes Name & Address MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☑ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others-LOAN Description STAFF PAY 5. Date Of Receipt: 05/09/2025 6. Vendor Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE, KENTWOOD, MI 49508	\$300.00 s	10,494.80
Contribution #3 PAC Receipt? Yes Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Fund Raiser Contribution	4.	00.00 \$	11,648.00
	Page Subtotal	1,500.00	0.00
	Grand Total of all Schedules 1-IK (Complete on last page of Schedule)		



1. Committee I. D. Number 2024200

2 Committee Name CITIZENS TO ELECT MONICA SPARKS

CANDIDATE COMM	IITTEE 2. Committee Name 311122113 13 22		
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box)5. Date of Receipt6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Business Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Fund Raiser Contribution	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description STAFF PAY 5. Date Of Receipt: 05/23/2025 6. Vendor Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE, KENTWOOD, MI 49508	500.00	12,894.30
Contribution # 2 PAC Receipt? Yes Name & Address MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Fund Raiser Contribution	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description DRINK FOR EVENT 5. Date Of Receipt: 05/24/2025 6. Vendor Name & Address: CAFE BOBA 4314 DIVISION AVE S, GRAND RAPIDS, MI 49548	345.00 s	13,239.30
Contribution #3 PAC Receipt? Yes Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503	4.	00.00\$	14,602.14
	Page Subtotal	1,345.00	0.00
	Grand Total of all Schedules 1-lk (Complete on last page of Schedule)		



1. Committee I. D. Number 2024200

2 Committee Name CITIZENS TO ELECT MONICA SPARKS

CANDIDATE COMM	IITTEE 2. Committee Name 311122113 13 221		
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box)5. Date of Receipt6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Business Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Fund Raiser Contribution	4.	500.00	15,102.14
Contribution # 2 PAC Receipt? Yes Name & Address MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☑ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others-LOAN Description STAFF PAY 5. Date Of Receipt: 06/13/2025 6. Vendor Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE, KENTWOOD, MI 49508	\$00.00 s	15,940.07
Contribution #3 PAC Receipt? Yes Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- LOAN ☐ STAFF PAY 5. Date Of Receipt: ☐ 06/20/2025 6. Vendor Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE, KENTWOOD, MI 49508	\$	16,940.07
	Page Subtotal	1,500.00	0.00
	Grand Total of all Schedules 1-IK (Complete on last page of Schedule)		

Enter this total on line 6 of Summary Page

Page 18 of 33



1. Committee I. D. Number 2024200

2 Committee Name CITIZENS TO ELECT MONICA SPARKS

CANDIDATE COMM	IITTEE 2. Committee Name 311122113 13 221		
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box)5. Date of Receipt6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Business Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Fund Raiser Contribution	4. Sendorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description STAFF PAY 5. Date Of Receipt: 06/27/2025 6. Vendor Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE, KENTWOOD, MI 49508	500.00	17,440.07
Contribution # 2 PAC Receipt? Yes Name & Address MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☑ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others-LOAN Description STAFF PAY 5. Date Of Receipt: 07/04/2025 6. Vendor Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE, KENTWOOD, MI 49508	500.00 s	18,437.54
Contribution #3 PAC Receipt? Yes Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated \$ 50 ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- LOAN Description STAFF PAY 5. Date Of Receipt: 07/12/2025 6. Vendor Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE, KENTWOOD, MI 49508	00.00 \$	19,437.54
	Page Subtotal	1,500.00	0.00
	Grand Total of all Schedules 1-IK (Complete on last page of Schedule)		



ITEMIZED IN-KIND CONTRIBUTIONS

ITEMIZED IN-KIND CONTR	0004000		
SCHEDULE 1-IK		FOT MONIO	A ODADICO
CANDIDATE COMM	2. Committee Name CITIZENS TO EL	ECT MONIC	A SPARKS
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box)5. Date of Receipt6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes	4. Endorsement or Guarantee of Bank Loan		
Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Business Address: KENT COUNTY	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description STAFF PAY 5. Date Of Receipt: 07/18/2025	500.00	20,195.19
300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Fund Raiser Contribution	6. Vendor Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE, KENTWOOD, MI 49508		
Contribution # 2 PAC Receipt? Yes Name & Address MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508	Goods or Services Purchased by Candidate or Others- LOAN	25.40	20,220.59
If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503	Description EVENT SUPPLIES 5. Date Of Receipt: 07/21/2025 6. Vendor Name & Address: KENTWOOD RENTAL, INC 745 44TH ST SE, KENTWOOD, MI 49548		
Contribution #3 PAC Receipt? Yes Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Fund Raiser Contribution	4.	00.00 s	20,720.59
	Daga Cubtatal	1 005 40	0.00
	Page Subtotal	1,025.40	0.00
	Grand Total of all Schedules 1-Ih (Complete on last page of Schedule		



1. Committee I. D. Number <u>20</u>24200

CITIZENS TO ELECT MONICA SPARKS

CANDIDATE COMM	IITTEE 2. Committee Name OTTIZETIO TO EE	LOT WONE	
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Business Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Fund Raiser Contribution	4.	500.00	21,220.59
Contribution # 2 PAC Receipt? Yes Name & Address MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Fund Raiser Contribution	Goods or Services Purchased by Candidate or Others- LOAN Description RENT	500.00 s	21,720.59
Contribution #3 PAC Receipt? Yes Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated \$ 6 ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others-LOAN Description ☐ DRINKS FOR EVENT 5. Date Of Receipt: ○8/07/2025 6. Vendor Name & Address: BAILEYS GROVE BEVERAGES 3866 52ND ST SE, KENTWOOD, MI 49512	3.59 \$	21,784.18
_	Page Subtota	1,063.59	0.00
	Grand Total of all Schedules 1-II (Complete on last page of Schedule		



1. Committee I. D. Number 2024200

2 Committee Name CITIZENS TO ELECT MONICA SPARKS

CANDIDATE COMM	IITTEE 2. Committee Name 311122113 13 22		
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box)5. Date of Receipt6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: KENNY JACKSON 4851 FULLER AVE SE GRAND RAPIDS, MI 49508 If over \$100.00 cumulative, please provide: Occupation: RETIRED Employer Name & Business Address:	4.	200.00	_{\$} 1,200.00
Fund Raiser Contribution			
Contribution #2 PAC Receipt? Yes Name & Address MICHELLE JOHNSON-COVINGTON 5898 EAST LYN HAVEN DR SE KENTWOOD, MI 49512	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☑ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others-LOAN	50.00	50.00
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	Description EVENT VENUE CONTRIBUTION 5. Date Of Receipt: 08/07/2025 6. Vendor Name & Address: BAILEYS GROVE CLUBHOUSE 5353 BAILEY GROVE DR, KENTWOOD, MI 49512		
Fund Raiser Contribution	4 🗆		
Contribution #3 PAC Receipt? Yes Name & Address: KRISTIAN GRANT PO BOX 7343 GRAND RAPIDS, MI 49510 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others-LOAN ☐ Description EVENT VENUE CONTRIBUTION 5. Date Of Receipt: 08/07/2025 6. Vendor Name & Address: BAILEYS GROVE CLUBHOUSE 5353 BAILEY GROVE DR, KENTWOOD, MI 49512	<u>0.00</u> \$	50.00
_	Page Subtota	300.00	1,300.00
	Grand Total of all Schedules 1-II (Complete on last page of Schedule	K	1,000.00



1. Committee I. D. Number 2024200

2 Committee Name CITIZENS TO ELECT MONICA SPARKS

CANDIDATE COMM	IITTEE 2. Committee Name		
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box)5. Date of Receipt6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: LISA KNIGHT 3260 CHENEY AVE NE GRAND RAPIDS, MI 49525 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	4. Sendorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description EVENT VENUE CONTRIBUTION 5. Date Of Receipt: 08/07/2025 6. Vendor Name & Address: BAILEYS GROVE CLUBHOUSE 5353 BAILEY GROVE DR, KENTWOOD, MI 49512	50.00	\$ 50.00
Contribution # 2 PAC Receipt? Yes Name & Address MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☑ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others-LOAN Description STAFF PAY 5. Date Of Receipt: 08/08/2025 6. Vendor Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE, KENTWOOD, MI 49508	500.00	22,284.18
Contribution #3 PAC Receipt? Yes Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☑ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- LOAN Description MAILING LABELS 5. Date Of Receipt: 08/15/2025 6. Vendor Name & Address: FEDEX 3614 28TH ST SE, GRAND RAPIDS, MI 49512	6.70 _{\$}	22,360.88
	Page Subtotal	626.70	50.00
	Grand Total of all Schedules 1-IK (Complete on last page of Schedule)		

Enter this total on line 6 of Summary Page

 $_{\text{Page}}\underline{23} \quad _{\text{of}}\underline{33}$



2 Committee Name CITIZENS TO ELECT MONICA SPARKS

CANDIDATE COMM	IITTEE 2. Committee Name		
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box)5. Date of Receipt6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: ANDRE POSEY 1018 WATKINS ST SE GRAND RAPIDS, MI 49507 If over \$100.00 cumulative, please provide: Occupation: SELF-EMPLOYED Employer Name & Business Address: ANDRE POSEY 1018 WATKINS ST SE, GRAND RAPIDS, MI 49507 Fund Raiser Contribution	4.	100.00	§ 350.00
Contribution # 2 Name & Address MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☑ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others-LOAN Description STAMPS 5. Date Of Receipt: 08/20/2025 6. Vendor Name & Address: UNITED STATES POSTAL SERVICE 1680 44TH ST SE, GRAND RAPIDS, MI 49508	51.00 s	22,421.88
Contribution #3 PAC Receipt? Yes Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated \$ 22 ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- LOAN Description YARD SIGN SUPPLIES 5. Date Of Receipt: 08/28/2025 6. Vendor Name & Address: LOWES 3330 28TH ST SE, KENTWOOD, MI 49512	25.00 _{\$}	22,646.88
	Page Subtotal	386.00	0.00
	Grand Total of all Schedules 1-IK		

Enter this total on line 6 of Summary Page

(Complete on last page of Schedule)



1. Committee I. D. Number 2024200

2 Committee Name CITIZENS TO ELECT MONICA SPARKS

CANDIDATE COMM	IITTEE 2. Committee Name 311122113 13 22		
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box)5. Date of Receipt6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Business Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Fund Raiser Contribution	4.	9.50	22,656.38
Contribution # 2 PAC Receipt? Yes Name & Address MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others- LOAN Description FOOD FOR EVENT	7.29	22,733.67
Contribution #3 PAC Receipt? Yes Name & Address: BRENDA MATHEWS 2088 EASTCASTLE DR SE APT AA-9 GRAND RAPIDS, MI 49508 If over \$100.00 cumulative, please provide: Occupation: RETIRED Employer Name & Address:	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated \$ 60 ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- LOAN Description BIG SIGNS 5. Date Of Receipt: 09/03/2025 6. Vendor Name & Address: BRENDA MATHEWS 2088 EASTCASTLE DR SE, APT AA-9, GRAND RAPIDS, MI 49508	00.00 \$	700.00
	Page Subtotal	686.79	700.00
	Grand Total of all Schedules 1-IK		

Enter this total on line 6 of Summary Page

(Complete on last page of Schedule)



ITEMIZED IN-KIND CONTRIBUTIONS

2 Committee Name CITIZENS TO ELECT MONICA SPARKS

CANDIDATE COMM	IITTEE 2. Committee Name		
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box)5. Date of Receipt6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Business Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Fund Raiser Contribution	4.	500.00	\$ 23,233.67
Contribution # 2 PAC Receipt? Yes Name & Address KATHLEEN JACKSON 4851 FULLER AVE SE GRAND RAPIDS, MI 49508 If over \$100.00 cumulative, please provide: Occupation: RETIRED Employer Name & Address:	4. ☐ Endorsement or Guarantee of Bank Loan ✓ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others-LOAN Description EVENT SUPPLIES 5. Date Of Receipt: 09/05/2025 6. Vendor Name & Address:	00.00	\$ 1,100.00
✓ Fund Raiser Contribution			
Contribution #3 PAC Receipt? Yes Name & Address: ANDRE POSEY 1018 WATKINS ST SE GRAND RAPIDS, MI 49507 If over \$100.00 cumulative, please provide: Occupation: SELF-EMPLOYED Employer Name & Address: ANDRE POSEY 1018 WATKINS ST SE, GRAND RAPIDS, MI 49507	4.	50.00	600.00
	Page Subtotal	850.00	1,700.00
	Grand Total of all Schedules 1-IK (Complete on last page of Schedule)		



1. Committee I. D. Number 2024200

2 Committee Name CITIZENS TO ELECT MONICA SPARKS

CANDIDATE COMM	IITTEE 2. Committee Name 311122113 13 22		
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: LONNIE POLK 2156 SANDY SHORE DR SE APT 102 GRAND RAPIDS, MI 49508 If over \$100.00 cumulative, please provide: Occupation: INDEPENDENT CONTRACTOR Employer Name & Business Address: LASER SPEC INSPECTIONS 500 REED ST, BELDING, MI 48809	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description FOOD FOR EVENT 5. Date Of Receipt: 09/06/2025 6. Vendor Name & Address:	780.12	_{\$} 880.12
✓ Fund Raiser Contribution			-
Contribution # 2 PAC Receipt? Yes Name & Address MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN	26.50	\$ <u>23,260.17</u>
If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Fund Raiser Contribution	Description EVENT SUPPLIES 5. Date Of Receipt: 09/08/2025 6. Vendor Name & Address: KENTWOOD RENTAL, INC. 745 44TH ST SE, KENTWOOD, MI 49548		
Contribution #3 PAC Receipt? Yes Name & Address: KATHLEEN BARNHOUSE 4851 FULLER AVE SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: RETIRED Employer Name & Address: Fund Raiser Contribution	4.	1.00	111.00
	Page Subtotal	867.62	880.12
	Grand Total of all Schedules 1-IK (Complete on last page of Schedule)	<	333112



1. Committee I. D. Number 2024200

CANDIDATE COMMITTEE

2. Committee Name CITIZENS TO ELECT MONICA SPARKS

CANDIDATE COMIN			
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box)5. Date of Receipt6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Business Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Fund Raiser Contribution	4.	42.39	\$ 23,302.56
Contribution # 2 Name & Address FRANTHEA PRICE 695 BRITTANY CT SE GRAND RAPIDS, MI 49548 If over \$100.00 cumulative, please provide: Occupation: NOT EMPLOYED Employer Name & Address:	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☑ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others-LOAN Description STAKES 5. Date Of Receipt: 09/11/2025 6. Vendor Name & Address: ACE HARDWARE 31 44TH ST SW, GRAND RAPIDS, MI 49548	34.72 s	584.72
Contribution #3 PAC Receipt? Yes Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503	4.	1.22 \$	23,333.78
	Page Subtotal	158.33	584.72
	Grand Total of all Schedules 1-IK (Complete on last page of Schedule)		

1. Committee I. D. Number 2024200

CANDIDATE COMMITTEE

2. Committee Name CITIZENS TO ELECT MONICA SPARKS

CANDIDATE COMIN			
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box)5. Date of Receipt6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Business Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503	4. Sendorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description DRINK FOR EVENT 5. Date Of Receipt: 09/17/2025 6. Vendor Name & Address: TOTAL WINE & MORE 4923 28TH ST SE, GRAND RAPIDS, MI 49546	88.23	\$ 23,422.01
Contribution # 2 PAC Receipt? Yes Name & Address TYLER HARRIS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: CUSTOMER SERVICE REPRESENTATIVE Employer Name & Address: BODY SCULPT, BETTER BODY MED SPA 3099 BROADMOOR AVE SE, KENTWOOD, MI 49512 Fund Raiser Contribution	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description YARD SIGN STAKES 5. Date Of Receipt: 09/17/2025 6. Vendor Name & Address: TYLER HARRIS 4768 SUMMER CREEK LN SE, KENTWOOD, MI 49508		\$ 100.00
Contribution #3 PAC Receipt? Yes Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503	4.	146.28	23,568.29
	Page Subto	tal 334.51	100.00

Grand Total of all Schedules 1-IK (Complete on last page of Schedule)

> Enter this total on line 6 of Summary Page

 $_{\text{Page}}\underline{29} \quad _{\text{of}}\underline{33}$



1. Committee I. D. Number 2024200

2 Committee Name CITIZENS TO ELECT MONICA SPARKS

CANDIDATE COMM	IITTEE 2. Committee Name 311122113131			
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box)5. Date of Receipt6. Name & Address of Vendor from whom goods or services were purchased		7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: SHARDAIRA JONES 183 BALDWIN ST A MAPLEWOOD, MI 49428 If over \$100.00 cumulative, please provide: Occupation: BUSINESS OWNER Employer Name & Business Address: REV - REVITALIZE 125 OTTAWA AVE SW, GRAND RAPIDS, MI 49503	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description EVENT VENUE AND DRINK CONTRIBUTION 5. Date Of Receipt: 09/19/2025 6. Vendor Name & Address:	 N	00.00	§ 600.00
Contribution # 2 PAC Receipt? Yes Name & Address MICHAEL BUXTON 1721 MADISON AVE SE GRAND RAPIDS, MI 49507 If over \$100.00 cumulative, please provide: Occupation: OWNER Employer Name & Address: T.M.G. PROMOTIONS 1721 MADISON AVE SE, GRAND RAPIDS, MI 49507	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOA Description MARKETING 5. Date Of Receipt: 09/19/2025 6. Vendor Name & Address:		00.000	\$ 1,000.00
Fund Raiser Contribution Contribution #3 PAC Receipt? Yes Name & Address: LATARRO TRAYLOR 869 WOOLSEY DR SW GRAND RAPIDS, MI 49503 If over \$100.00 cumulative, please provide: Occupation: ATTORNEY Employer Name & Address: SANKOFA LAW PLC 869 WOOLSEY DR SW, GRAND RAPIDS, MI 49503 Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ✓ Goods Donated or Loaned ☐ Services Donated \$		0.00	500.00
	Page Subto	otal	2,100.00	2,100.00
	Grand Total of all Schedules (Complete on last page of Sched			

Enter this total on line 6 of Summary Page

 $_{Page}$ 30 $_{of}$ 33



1. Committee I. D. Number 2024200

2. Committee Name CITIZENS TO ELECT MONICA SPARKS

CANDIDATE COMIN	III I E E 2. Committee Name		
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box)5. Date of Receipt6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: KATHLEEN BARNHOUSE 4851 FULLER AVE SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: RETIRED Employer Name & Business Address: Fund Raiser Contribution	4. Sendorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description EVENT SUPPLIES 5. Date Of Receipt: 09/24/2025 6. Vendor Name & Address: STAPLES 5110 28TH ST SE, GRAND RAPIDS, MI 49512	16.99	127.99
Contribution # 2 PAC Receipt? Yes Name & Address KATHLEEN BARNHOUSE 4851 FULLER AVE SE KENTWOOD, MI 49508	Goods or Services Purchased by Candidate or Others- LOAN	33.98 s	161.97
If over \$100.00 cumulative, please provide: Occupation: RETIRED Employer Name & Address: Fund Raiser Contribution	Description EVENT SUPPLIES 5. Date Of Receipt: 09/25/2025 6. Vendor Name & Address: STAPLES 5110 28TH ST SE, GRAND RAPIDS, MI 49512		
Contribution #3 PAC Receipt? Yes Name & Address: KATHLEEN BARNHOUSE 4851 FULLER AVE SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: RETIRED Employer Name & Address:	4.	1.00 _{\$}	222.97
Fund Raiser Contribution			
	Page Subtotal	111.97	222.97
	Grand Total of all Schedules 1-Ik (Complete on last page of Schedule		



ITEMIZED IN-KIND CONTRIBUTIONS

ITEMIZED IN-KIND CONTR	RIBUTIONS		
SCHEDULE 1-II			
CANDIDATE COMM	11TTEE 2. Committee Name CITIZENS TO ELI	ECT MONIC	SA SPARKS
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box)5. Date of Receipt6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: NANCY GREEN 2431 FOREST HILL AVE SE APT 2104 GRAND RAPIDS, MI 49546 If over \$100.00 cumulative, please provide: Occupation: RETIRED Employer Name & Business Address:	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description FOOD FOR EVENT 5. Date Of Receipt: 10/03/2025 6. Vendor Name & Address:	399.00	\$ 399.00
Fund Raiser Contribution Contribution # 2 PAC Receipt? Yes Name & Address PHILPAC 2615 HALL ST SE	Goods of Services Purchased by Candidate of Others	00.00	\$_1,100.00
GRAND RAPIDS, MI 49506 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	Goods or Services Purchased by Candidate or Others- LOAN Description FOOD FOR EVENT CONTRIBUTION 5. Date Of Receipt: 10/07/2025 6. Vendor Name & Address: THE CANDIED YAM 932 DIVISION AVE S, GRAND RAPIDS, MI 49507		
Fund Raiser Contribution Contribution #3 PAC Receipt? Yes Name & Address: MONICA SPARKS 4768 SUMMER CREEK LN SE KENTWOOD, MI 49508 If over \$100.00 cumulative, please provide: Occupation: COUNTY COMMISSIONER Employer Name & Address: KENT COUNTY 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- LOAN Description RENT 5. Date Of Receipt: 10/13/2025 6. Vendor Name & Address: JACK VOSS 4835 EASTERN AVE SE, KENTWOOD, MI 49508	00.00	24,068.29
	Page Subtotal	999.00	25,567.29
	Grand Total of all Schedules 1-IK (Complete on last page of Schedule)		

ITEMIZED IN-KIND CONTRIBUTIONS SCHEDULE 1-IK

1. Committee I. D. Number 2024200

2. Committee Name CITIZENS TO ELECT MONICA SPARKS

3. Name and Address from whom received in Contribution (Check applicable box) I own an individual, crief last from an Individual, crief last from a Political Committee (Bank Loan Individual PACs). Reportal In-kind Contributions. A Type of In-kind Contribution (Same a Committee) (Bank Loan Individual PACs). Reportal In-kind Contributions. A didness of Vendor from whom goods or services were Park Address: A didness of Vendor from whom goods or services were Park Address: A didness of Vendor from whom goods or services were Park Address: A didness of Vendor from whom goods or services were Park Address: A didness of Vendor from whom goods or services were Park Address: A didness of Vendor from whom goods or services were Park Address: A didness of Vendor from whom goods or services were Park Address: A didness of Vendor from whom goods or services were Park Address was a didness of Vendor from whom goods or services were Park Address was a didness of Vendor from whom goods or services were Park Address of Vendor from whom goods or services were Park Address was a didness of Vendor from whom goods or services were Park Address of Vendor from whom goods or services Denoted Services Donated Services Donated Services Purchased by Candidate or Others Cooper Vendor Name & Address: A didness of Services Purchased by Candidate or Others Services Purcha	CANDIDATE COMIN	IIIIEE 2. Committee Name		
Name & Address: WALLACE MASSIE 588 48TH ST SE KENTWOOD, MI 49548 If ver \$100.00 cumulative, please provide: Corulpation #2 PAC Receipt? Yes Name & Address: Wender \$100.00 cumulative, please provide: Cocupation: Employer Name & Address: Fund Raiser Contribution Contribution #3 PAC Receipt? Yes Name & Address: Fund Raiser Contribution Contribution #3 PAC Receipt? Yes Name & Address: Fund Raiser Contribution Contribution #3 PAC Receipt? Yes Name & Address: Click Here for Memo Itemization Fund Raiser Contribution Contribution #3 PAC Receipt? Yes Name & Address: Click Here for Memo Itemization Fund Raiser Contribution Contribution #3 PAC Receipt? Yes Name & Address: Click Here for Memo Itemization Fund Raiser Contribution Contribution #3 PAC Receipt? Yes Name & Address: Click Here for Memo Itemization Fund Raiser Contribution Contribution #3 PAC Receipt? Yes Name & Address: Click Here for Memo Itemization Fund Raiser Contribution Fund Raiser Contribution Contribution #3 PAC Receipt? Yes Name & Address: Click Here for Memo Itemization Fund Raiser Contribution Fund Raiser Contribution Contribution #3 PAC Receipt? Yes Name & Address: Click Here for Memo Itemization Contribution #3 PAC Receipt Provide: Cocupation: Employer Name & Address: Click Here for Memo Itemization Contribution: Contribution #4 PAC Receipt Provide: Cocupation: Employer Name & Address: Click Here for Memo Itemization	name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs).	5. Date of Receipt6. Name & Address of Vendor from whom goods or services were	Fair Market	for Election Cycle (Through
Contribution # 2 PAC Receipt?	Name & Address: WALLACE MASSIE 588 48TH ST SE KENTWOOD, MI 49548 If over \$100.00 cumulative, please provide: Occupation: PROPERTY MANAGER Employer Name & Business Address: PARIS ESTATES MOBILE HOME PARK 310 48TH ST SW,	Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description FOOD FOR EVENT 5. Date Of Receipt: 10/17/2025	201.09	_{\$} 201.09
Society and the second	Contribution # 2 PAC Receipt? Yes	Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others \$		\$
Contribution #3 PAC Receipt? Yes 4. Endorsement or Guarantee of Bank Loan Name & Address: Goods Donated or Loaned Services Donated \$	Occupation:	5. Date Of Receipt:6. Vendor Name & Address:	ick Here for Mem	o Itemization
Name & Address: Goods Donated or Loaned Services Donated \$ Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address: Description 5. Date Of Receipt: 6. Vendor Name & Address: Click Here for Memo Itemization	Fund Raiser Contribution			
Description		Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others		\$
Page Subtotal 201.09 201.09	Occupation: Employer Name & Address:	Description 5. Date Of Receipt: 6. Vendor Name & Address:	lick Here for Mem	o Itemization
		Page Subtota	201.09	201.09

Grand Total of all Schedules 1-IK (Complete on last page of Schedule)

33,332.07



1. Committee I. D. Number 2024200

2. Committee Name CITIZENS TO ELECT MONICA SPARKS

Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
5. Name and address of person of vendor to whom paid	4. Furpose (nequired information)	5. Date	6. Amount
Expenditure #1			
Name ACTBLUE, LLC		03/01/2025	\$ 13.50
, 	Purpose: FEES	Date	Ψ <u>10.50</u>
PO BOX 962017	Purpose:		
BOSTON, MA 02196			
2001011, 1111102100	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
	statement		
Expenditure #2			
Name YOCHEF'S CATERING COMPANY		03/05/2025	\$ 334.36
	Purpose: FOOD FOR EVENT	Date	<u> </u>
Address 34 44TH ST SE	Purpose: 1 3 3 1 3 1 2 1 2 1 1 1		
GRAND RAPIDS, MI 49548			
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #3			
Name LIBERTY DIRECT		03/07/2025	
LIBERTY BILLEGY	OUEOKO		\$ <u>30.90</u>
Address	Purpose: CHECKS	Date	
15955 LA CANTERA PKWY			
SAN ANTONIO, TX 78256			
	LICheck box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #4			
Name NGP-VAN		05/27/2025	
	OLIDO O DIDTIONI	Date	\$ 125.00
Address	Purpose: SUBSCRIPTION	Dale	
655 15TH ST NW			
#650			
WASHINGTON, DC 20005	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name ACTBLUE, LLC		06/01/2025	* O OO
Address	Purpose: COMMISSION	Date	\$ <u>9.00</u>
PO BOX 962017	•		
BOSTON, MA 02196			
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
	Subto	otal this page	512.76
	Outsid Takel of all	Cobodulas 1D	0.2.70
	Grand Total of all (Complete on last page		
	/b bag	/	



1. Committee I. D. Number 2024200

2. Committee Name CITIZENS TO ELECT MONICA SPARKS

Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
5. Name and address of person of vertuor to whom paid	4. Furpose (Nequired Information)	5. Date	6. Amount
Expenditure #1			
Name ACTBLUE, LLC		06/01/2025	\$ 9.00
, , , , , , , , , , , , , , , , , , , ,	FFFS	Date	Ψ <u>3.00</u>
Address P.O.BOX 962017	Purpose: FEES		
BOSTON, MA 02196			
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #2			
Name NGP-VAN		06/04/2025	405.00
TOT VITA	OUDOODIDION	Date	\$ <u>125.00</u>
Address	Purpose: SUBSCRIPTION	Date	
655 15TH ST NW			
#650			
WASHINGTON, DC 20005	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
Expenditure #3	statement		
Name STAPLES		06/13/2025	a 20 45
	Purpose: OFFICE MATERIALS	Date	\$ <u>29.45</u>
Address 5110 28TH ST SE	Purpose: Of FIGE WATERIALS	Dato	
GRAND RAPIDS, MI 49512			
CITATION, WII 40012			
П	LICheck box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #4			
Name STAPLES		06/13/2025	
317 II 22 3		Date	\$ 18.01
Address	Purpose: OFFICE SUPPLIES	Dale	
5110 28TH ST SE			
GRAND RAPIDS, MI 49512			
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
<u> </u>	statement		
Expenditure #5			
Name CITY OF KENTWOOD PARKS AND RECREATION		06/23/2025	
Address	Purpose:NON FUNDRAISING EVENT PAYMENT	Date	\$ <u>30.00</u>
355 48TH ST SE	rurpose:	Date	
GRAND RAPIDS, MI 49548			
5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
L Caracteristics	statement		
	Subto	tal this page	211.46
	Grand Total of all	Schedules 1B	
	(Complete on last page	e of Schedule)	



1. Committee I. D. Number 2024200

2. Committee Name CITIZENS TO ELECT MONICA SPARKS

	A Division (Partition)	I E Data	C A
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name CUSTOM BALLOON NOW		06/23/2025	\$ 142.50
Address	NON FUNDRAISING EVENT SUPPLIES Purpose:	Date	+ 112.00
16107 KENSINGTON DR	ruipose.		
#172			
SUGAR LAND, TX 77479	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2	Statement		
Name ACTBLUE, LLC		07/01/2025	
ACTOLUE, LLC			\$ <u>13.88</u>
Address	Purpose: COMMISSION	Date	
PO BOX 962017			
BOSTON, MA 02196			
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #3	- Clateria		
Name NGP-VAN		07/00/0007	
NGF-VAN		07/03/2025	\$ 125.00
Address	Purpose: SUBSCRIPTION	Date	
655 15TH ST NW			
#650			
WASHINGTON, DC 20005	LICheck box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #4			
Name ACTBLUE, LLC		08/01/2025	40.04
• • •	EEEQ	Date	\$ <u>16.81</u>
Address PO BOX 962017	Purpose: FEES		
BOSTON, MA 02196			
5001014, WILL 100	Charle have if their source additions to record		
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #5			
Name NGP-VAN		08/04/2025	
Address	Purpose: SUBSCRIPTION	Date	\$ <u>125.00</u>
655 15TH ST NW	rurpose:	_0.0	
WASHINGTON, DC 20005			
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
	Subto	tal this page	423.19
			- 1∠ U.1U
	Grand Total of all ((Complete on last page)		
	(



1. Committee I. D. Number 2024200

2. Committee Name CITIZENS TO ELECT MONICA SPARKS

	Similar varie	T = = :	
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name RJ'S PRINTING LLC		08/08/2025	\$ 711.26
	Purpose: YARD SIGNS	Date	Ψ <u>/11.20</u>
Address 1001 2ND ST SE	Purpose: 1711 D CICITO		
KALAMAZOO, MI 49001			
10 (E) (W) (200; WII 4000)	Check box if this expenditure is payment of		
Court Prices	debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #2			
Name RJ'S PRINTING LLC		08/20/2025	\$ 1,286.31
	PRINTING	Date	
Address	Purpose: PRINTING		
1001 2ND ST SE			
KALAMAZOO, MI 49001			
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #3			
Name GRAYCE HOOGERHYDE		00/00/0005	
GRATULTIOUGERITIDE		08/22/2025	\$ 1,000.00
Address	Purpose: STAFF PAY	Date	
9726 SHAW CREEK CT NE			
ROCKFORD, MI 49341			
	LICheck box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #4			
Name ACTBLUE, LLC		09/01/2025	
7101020, 220		Date	\$ 25.22
Address	Purpose: FEES	Date	
PO BOX 962017			
BOSTON, MA 02196			
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name NGP-VAN		09/05/2025	* 10F 00
Address	Purpose: SUBSCRIPTION_	Date	\$ <u>125.00</u>
655 15TH ST NW			
WASHINGTON, DC 20005			
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
	Subto	tal this page	3,147.79
			U, 177.7U
	Grand Total of all ((Complete on last page)		
	(Ouriplete ou last page	or correduce)	



1. Committee I. D. Number 2024200

2. Committee Name CITIZENS TO ELECT MONICA SPARKS

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name GRAYCE HOOGERHYDE Address 9726 SHAW CREEK CT NE ROCKFORD, MI 49341	Purpose: STAFF PAY	09/05/2025 Date	\$ <u>1,000.0</u> 0
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2 Name REV - REVITALIZE Address 125 OTTAWA AVE NW	Purpose: FUNDRAISING EVENT MARKETING	09/13/2025 Date	\$ <u>48.52</u>
GRAND RAPIDS, MI 49503 Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Name REV - REVITALIZE Address	Purpose: DRINKS FOR FUNDRAISING EVENT	09/13/2025 Date	\$ <u>300.00</u>
125 OTTAWA AVE NW GRAND RAPIDS, MI 49503 Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Name GRAYCE HOOGERHYDE	CTAFE DAY	09/16/2025 Date	\$ <u>1,000.00</u>
9726 SHAW CREEK CT NE ROCKFORD, MI 49341	Purpose: STAFF PAY		
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5 Name THE ORIGINAL PRINT SHOPPE Address	Purpose: CAMPAIGN MAILER	09/17/2025 Date	\$ <u>3,991.19</u>
270 S TELEGRAPH RD PONTIAC, MI 48341	Check box if this expenditure is payment of debt or obligation reported on previous statement	-	
<u> </u>		tal this page	6,339.71
	Grand Total of all \$ (Complete on last page)		



1. Committee I. D. Number 2024200

2. Committee Name CITIZENS TO ELECT MONICA SPARKS

Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
3. Name and address of person of vendor to whom paid	4. Fulpose (Nequiled illioilliation)	J. Dale	o. Amount
Expenditure #1			
Name ONE MICHIGAN ALLIANCE FUND		09/19/2025	\$ 75.00
Address	NON FUNDRAISING EVENT PAYMENT	Date	<u> 70.00</u>
Address 2615 HALL ST SE	Purpose:		
GRAND RAPIDS, MI 49506			
,	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
	statement		
Expenditure #2			
Name J.B. PRINTING		09/23/2025	\$ 716.56
Address	Purpose: YARD SIGNS	Date	110100
Address 3111 LAKE ST	Purpose.		
KALAMAZOO, MI 49048			
IVALAWAZOO, WII 49040			
□	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #3			
Name THE ORIGINAL PRINT SHOPPE		09/28/2025	. 4 745 00
	CAMPAIGNIMAII ED	Date	\$ <u>1,715.33</u>
Address 270 S TELEGRAPH RD	Purpose: CAMPAIGN MAILER	Date	
PONTIAC, MI 48341			
1 O111110, WII 40041	Check box if this expenditure is payment of		
Fund Brings	debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #4			
Name J.B. PRINTING		09/29/2025	. 740 50
• • •	Purpose: YARD SIGNS	Date	\$ <u>716.56</u>
Address 3111 LAKE ST	Purpose: IAIID SIGINS		
KALAMAZOO, MI 49048			
IVALAWAZOO, WII 49040			
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #5			
Name ACTBLUE, LLC		10/01/2025	
	FEEQ	10/01/2025	\$ 82.58
Address PO BOX 962017	Purpose: FEES	Date	
BOSTON, MA 02196			
2001014, 101/102100	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
		4-14-1	0.000.00
	Subto	tal this page	3,306.03
	Grand Total of all		
	(Complete on last page	e of Schedule)	



1. Committee I. D. Number 2024200

2. Committee Name CITIZENS TO ELECT MONICA SPARKS

	ommittee rutine		
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name NGP-VAN		10/03/2025	• 10E 00
1401 77114	SLIBSCRIPTION	Date	\$ <u>125.00</u>
Address CFF 1FTH CT NIM	Purpose: SUBSCRIPTION	Baic	
655 15TH ST NW			
WASHINGTON, DC 20005			
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2			
Name GRAYCE HOOGERHYDE		10/03/2025	
CHATCE HOOGEHITTE	0-1 5.1/		\$ <u>1,000.00</u>
Address	Purpose: STAFF PAY	Date	
9726 SHAW CREEK CT NE			
ROCKFORD, MI 49341			
	Check box if this expenditure is payment of		
Court Potent	debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #3			
Name CAMPAIGN VERIFY		10/07/2025	05.00
07 IIII 7 II GAT V 12 I III 1	ALITHORIZATION TOLEN		\$ <u>95.00</u>
Address	Purpose: AUTHORIZATION TOKEN	Date	
1215 31ST ST NW			
PO BOX 3554			
WASHINGTON, DC 20007	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4			
Name THE CANDIED YAM		10/07/0005	
THE CANDILD TAIVI		10/07/2025	\$ 200.00
Address	Purpose: FOOD FOR EVENT	Date	
932 DIVISION AVE S	i uipose.		
GRAND RAPIDS, MI 49507			
,	Check box if this expenditure is payment of		
	debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #5			
Name J.B. PRINTING		10/11/0005	
5.D. 1 111111110	CAMBAICNILITEDATUSE	10/11/2025	\$ 1,134.20
Address Odda LAKE CT	Purpose: CAMPAIGN LITERATURE	Date	
3111 LAKE ST			
KALAMAZOO, MI 49048	Check box if this expenditure is payment of		
	debt or obligation reported on previous		
Fund Raiser	statement		
	Subto	tal this page	2,554.20
	Occupation 1 of the	Calaadud - 45	_,
	Grand Total of all ((Complete on last page)		



1. Committee I. D. Number

2024200

2 Committee Name CITIZENS TO ELECT MONICA SPARKS

2.0	ommittee Name		
Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name COMFORT LOVE		10/14/2025	\$ 1,000.00
33 3.1 <u>23.1</u>	Purpose: GRAPHIC DESIGN	Date	\$ <u>1,000.0</u> 0
Address 2038 CYPRESS ST SW	Purpose: CITAL THO DESIGN		
WYOMING, MI 49519			
_	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2			
Name INTUIT MAILCHIMP		10/16/2025	
INTOTI WAILGHIMP			\$ 75.00
Address	Purpose: MARKETING	Date	
405 N ANGIER AVE NE			
ATLANTA, GA 30308			
7(12/((\frac{1}{1})(\frac{1})(\frac{1}{1})(\frac{1}{1})(\frac{1}{1})(\frac{1}{1})(\frac{1}{1})(\frac{1}{1})(\frac{1}{1})(\frac{1}{1})(\frac{1}{1})(\frac{1}{1})(\frac{1}{1})(\frac{1}{1})(\frac{1}{1})(\frac{1}{1})(\frac{1})(\frac{1}{1})(\frac{1}{1})(\frac{1}{1})(\frac{1}{1})(\frac{1}{1})(\frac{1}{1})(\frac{1}{1})(\frac{1})(\frac{1}{1})(\frac{1}{1})(\frac{1})(\frac{1}{1})(\frac{1})(\frac{1}{1})(\frac{1}{1})(\frac{1})(\frac{1}{1})(\frac{1}{1})(\frac{1}{1})(\frac{1}{1})(\frac{1}{1})(\frac{1}{1})(\frac{1}{1})(\frac{1})(\frac{1})(\frac{1})(\frac{1})(\frac{1})(\frac{1})(\frac{1})(\frac{1})(\frac{1})(\fra			
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #3			
Name GRAYCE HOOGERHYDE		10/17/0005	
GNATOL HOOGENITIDE		10/17/2025	\$ 1,000.00
Address	Purpose: STAFF PAY	Date	
9726 SHAW CREEK CT NE	,		
ROCKFORD, MI 49341			
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4	Statement		
Name			
Name			\$
Address		Date	Φ
Address	Purpose:		
	Click H	lere for Memo I	temization Type
		icre for Memo i	tomization Type
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #5			
Name			
Traine			\$
Address	Purpose:	Date	Φ
		lere for Memo I	Itemization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
	Quinto	tal this page	2.075.00
	Oublo	uo pago	2,075.00

Grand Total of all Schedules 1B (Complete on last page of Schedule)

18,570.14



Page 2 of 6

FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

2024200 1. Committee I.D. Number

2. Committee Name CITIZENS TO ELECT MONICA SPARKS

	- USE A SEPARATE SH	EET FOR EACH EVENT -	
. Date Event Was Held	Number of Individuals Attending or Participating (whichever is greater)	5. Type of Fund Raising Activity	6. Address and Name (If any) of the place where the activity was held. MORENAS EVENT VENU
03/21/2025	150	CAMPAIGN KICK-OFF	4470 BRETON RD SE KENTWOOD, MI 49508 Private Residence
Total Contributions	2,095.00		
Other Receipts	0.00		
Gross Receipts (Add lines 7 a	and 8) 2,095.00		
. Total Cost of Event otal Cost includes In-Kind Cor	6,338.79 ntributions and All Expenditures	Made For the Event)	
_	int fund raiser and complete the	,	
Co-Sponsor(s)	Contribution S (%)	Split	Expenditure Split (%)
			
-	-		
_			
-		er Schedule for each fund raisin	

Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-IK), Itemized Expenditures Schedule (1B) and the



Page 3 of 6

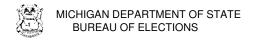
FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

2024200

2. Committee Name CITIZENS TO ELECT MONICA SPARKS

. Date Event Was Held	Number of Individuals Attending or Participating (whichever is greater)	5. Type of Fund Raising Activity	6. Address and Name (If any) of the place where the activity was held. TEAMSTERS LOCAL 406
07/19/2025	40	COMMISSIONERS COOK-OFF	3315 EASTERN AVE SE GRAND RAPIDS, MI 4950 Private Residence
Total Contributions	175.00		
Other Receipts	0.00		
Gross Receipts (Add lines 7	and 8) 175.00		
. Total Cost of Event otal Cost includes In-Kind Co	300.02 ntributions and All Expenditures	s Made For the Event)	
. Check if event was a join	int fund raiser and complete the	e following:	
Co-Sponsor(s)	Contribution S (%)	Split	Expenditure Split (%)
	-		

Schedule (1A), Itemized In-Kind Contributions Schedule (1-IK), Itemized Expenditures Schedule (1B) and the



Page 4 of 6

FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

2024200

2. Committee Name CITIZENS TO ELECT MONICA SPARKS

- USE A			
	A SEPARATE SH	EET FOR EACH EVENT	-
	of Individuals Attending ating (whichever is	5. Type of Fund Raising Activity	6. Address and Name (If any) of place where the activity was held BAILEY'S GROVE CLUB HOUSE
	30	SIPS WITH SPARKS	5353 BAIL FY GROVE DR
	125.00		
	0.00		
and 8)	125.00		
ntributions	538.59 and All Expenditures	Made For the Event)	
oint fund ra	iser and complete the	following:	
	Contribution S (%)	plit	Expenditure Split (%)
-			
_			
-			
_			
)	or Participa greater) and 8)	or Participating (whichever is greater) 30 125.00 0.00 125.00 538.59 Intributions and All Expenditures oint fund raiser and complete the Contribution S	or Participating (whichever is greater) 30 SIPS WITH SPARKS 125.00 0.00 125.00 538.59 Intributions and All Expenditures Made For the Event) Sint fund raiser and complete the following: Contribution Split

Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-IK), Itemized Expenditures Schedule (1B) and the



Page 5 of 6

FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

2. Committee Name CITIZENS TO ELECT MONICA SPARKS

09/06/2025 Total Contributions Other Receipts Other Receipts (Add lines 7 and Other Cost of Event Total Cost includes In-Kind Contributions	2,543.69	·	6. Address and Name (If any) of the place where the activity was held. VETERANS MEMORIAL PAR 355 48TH ST SE GRAND RAPIDS, MI 49548 Private Residence
09/06/2025 Total Contributions Other Receipts Gross Receipts (Add lines 7 and 0. Total Cost of Event Total Cost includes In-Kind Contributions of Event In-Kind	1,190.00 0.00 1,190.00 2,543.69 ributions and All Expenditures	Made For the Event)	355 48TH ST SE GRAND RAPIDS, MI 49548
. Other Receipts . Gross Receipts (Add lines 7 and 0. Total Cost of Event Total Cost includes In-Kind Contri 1.	0.00 1,190.00 2,543.69 ributions and All Expenditures	·	
. Gross Receipts (Add lines 7 and 0. Total Cost of Event Total Cost includes In-Kind Contribution 1. Check if event was a joint	1,190.00 2,543.69 ributions and All Expenditures	·	
O. Total Cost of Event Total Cost includes In-Kind Contri 1. Check if event was a joint	2,543.69 ributions and All Expenditures	·	
Total Cost includes In-Kind Contri	ributions and All Expenditures	·	
_	fund raiser and complete the	following:	
Co-Sponsor(s)			
	Contribution S (%)	Split	Expenditure Split (%)
		<u></u>	
period covered by the Car Receipts and expenditures	mpaign Statement. es listed on a Fund Raiser Sch	er Schedule for each fund raising nedule must also be reported on e (1-IK), Itemized Expenditures	the Itemized Contributions



Page 6 of 6

FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

2024200 1. Committee I.D. Number

2. Committee Name CITIZENS TO ELECT MONICA SPARKS

	- USE A SEPARATE SH	EET FOR EACH EVENT -	
3. Date Event Was Held	4. Number of Individuals Attending or Participating (whichever is greater)	5. Type of Fund Raising Activity	6. Address and Name (If any) of the place where the activity was held. REV - REVITALIZE
09/19/2025	40	SIP ART SPARKS	125 OTTAWA AVE NW GRAND RAPIDS, MI 4950 Private Residence
Total Contributions	3,680.00		
Other Receipts	0.00		
Gross Receipts (Add lines 7 a	nd 8) 3,680.00		
). Total Cost of Event otal Cost includes In-Kind Con	5,825.95 tributions and All Expenditures	Made For the Event)	
	·		
. Check if event was a joir	nt fund raiser and complete the	e following:	
. Check if event was a joir Co-Sponsor(s)	nt fund raiser and complete the Contribution S (%)	-	Expenditure Split (%)
_	Contribution S	-	
_	Contribution S	-	
_	Contribution S	-	
_	Contribution S	-	
_	Contribution S	-	
_	Contribution S	-	
_	Contribution S	-	

Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-IK), Itemized Expenditures Schedule (1B) and the